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Annual Report 1985

The New York Hospital–Cornell Medical Center

Responding to Change is the theme of this report. It was in anticipation of an era of rapid change that the medical center's joint board inaugurated a forward-planning process in 1980 after a period of largely unplanned growth. Most of the major achievements and initiatives described in this report stem from this forward-looking process and continues to guide planning.

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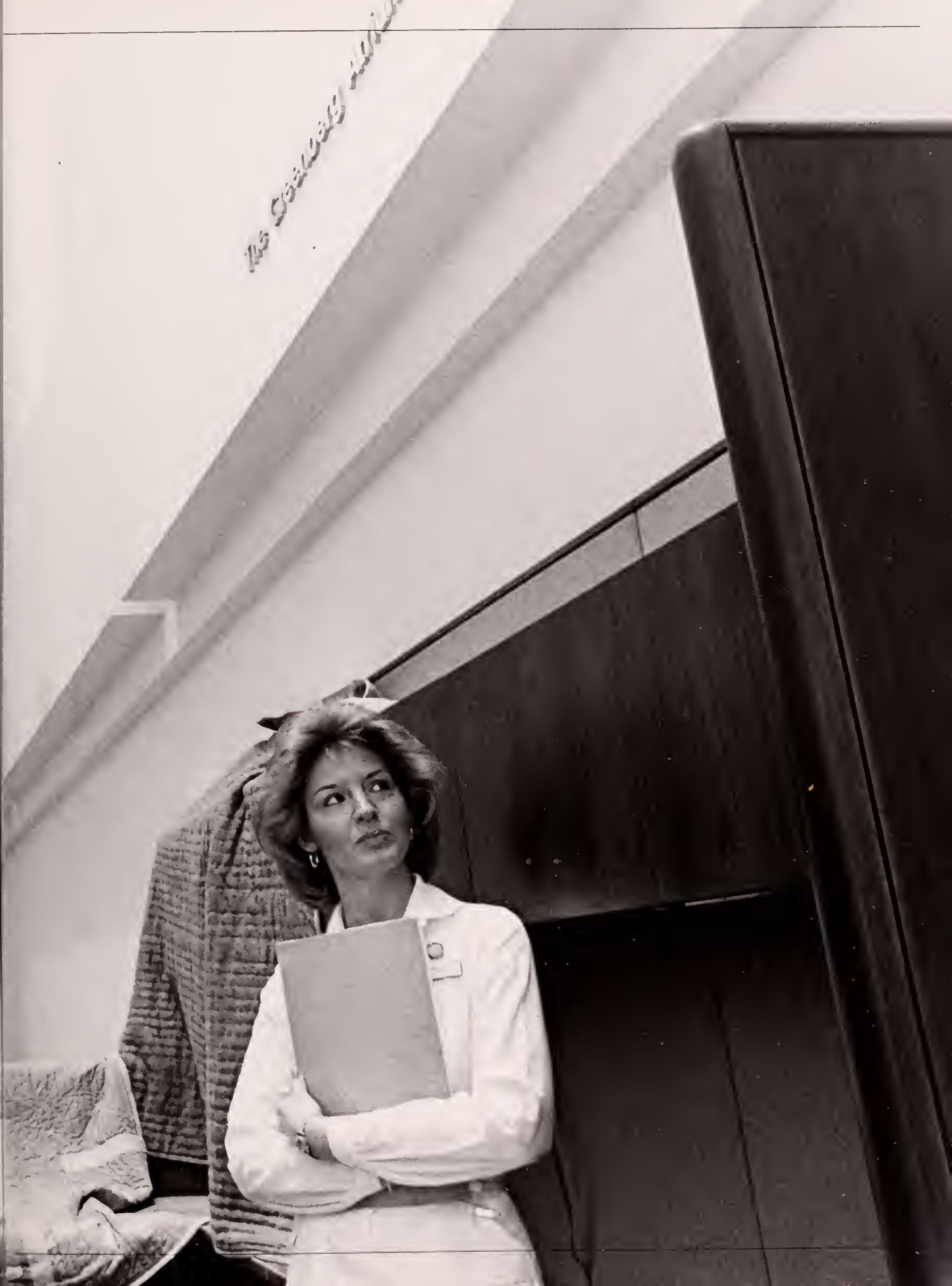


Chairmen's Report

By general agreement, this is a time of rapid change in American medicine. The ferment normal to biomedical science, where yesterday's discovery is often superseded tomorrow, extends today to all of medicine, affecting long-standing modes of health-care delivery, practice, and education.

Responding to Change is the theme of this report. It was in anticipation of an era of rapid change that the medical center's joint board inaugurated a foward-planning process in 1979 after a period of largely unplanned growth. Most of the major achievements and initiatives described in this report derive from this forward plan, which continues to evolve today.

A critical need recognized in the forward plan was that of strengthening the center's ability to provide general hospital services at the most cost-effective rate for the community. The C.V. Starr Pavilion, which opened last year, gives us the modern diagnostic and ambulatory facilities we need to meet this goal. Further gains in community service will derive from the Helmsley Medical Tower at the New York Hospital–Cornell Medical Center. This beautiful 36-storey building under construction at 70th Street and York Avenue honors Mr. and Mrs. Harry B. Helmsley, whose magnificent gift of $33 million, announced in April 1986, will support a major modernization of the hospital. A key element in this will be the Helmsley Medical Tower, which will provide much-needed staff housing plus 140 units for short-term use by patients or their families.

The forward plan has also set in motion vital initiatives affecting research and education. With help from the medical center's many friends, and through the leadership of our campaign co-chairmen Eleanor Elliott and Jansen Noyes Jr., we have made great progress in attracting support for the basic-science renewal essential to this center's future. The forthcoming groundbreaking for the William and Mildred Lasdon Biomedical Research Center will be a landmark in this effort. Meanwhile, after an extended period of study and planning, the medical college last year implemented the first steps in a major curriculum revision. At a time when cell biology and other basic sciences are more important than ever to medicine, it puts renewed emphasis on independent scientific research.

As we look ahead, we see questions arising about the shape of the health-care-delivery system in the New York area and about the place of this center in it. New York State is now approving the entry of for-profit HMOs in an effort to curb medical costs. It is not yet clear, though, how managed care will develop in this area or how this center might best participate in it. For the present, our course will be to keep ourselves abreast of developments nationwide, analyze every opportunity with great care, stay flexible in our relationships, and build a network of linkages appropriate to our missions and overall commitment to quality. One such network is our Corporate Care System, which offers medical services to 70,000 employees of 70 corporations.

The ability of this center to respond to new challenges is a tribute first, last, and always to the 8,000 people who work here. On behalf of the boards of the hospital and medical college, we thank them for their superb efforts throughout 1985.

Robert S. Hatfield
Chairman of the Joint Board, 1985

Frank H.T. Rhodes
Chairman of the Joint Board, 1986

Responding to Change

Responding to an era of rapid change is, perhaps, the major challenge confronting the medical center in the 1980s. The brief essays on the following pages illustrate aspects of this response.

Community Service: The Starr Pavilion greatly expands the center's capacity to give cost-effective, quality care to people in the community, whether as inpatients or outpatients.

New Curriculum: The medical college implements a curriculum that gives renewed emphasis to self-learning, problem-solving, and independent study and research.

Gerontology Internship: A unique summer program that helps pre-clinical medical students develop sensitivity to the needs of the elderly.

Caring for AIDS: A staff nurse finds in AIDS an opportunity to learn a lot and give a lot, frightening though the disease may be.

Corporate Care System: A new program that puts the hospital's full range of services at the disposal of local corporations, organizations, and large-membership groups.

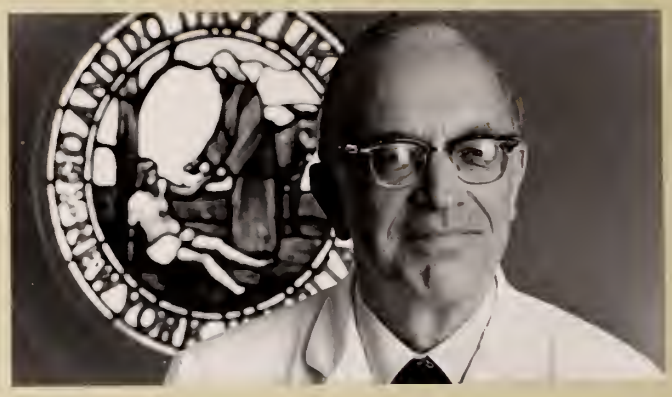
Serving Low-Income Areas: New York Hospital residents serve as the surgical house staff for Jamaica Hospital, in a low-income area of Queens.

Clinical Research Center: CRC's new emphasis on acute disorders derives from the need to translate scientific advances as quickly as possible into improved patient care.

Positron Emission Tomography: PET takes brain research beyond the limits of laboratory science to direct studies of human subjects.

Planning and Building: Self-discipline as an essential feature of creative leadership—especially in a neighborhood where every square inch of space is at a premium.

Basic Science: Strengthening the medical center's programs in molecular biology as a major thrust for the 1980s.



At the same time that the New York Hospital-Cornell Medical Center is an international institution, drawing patients from six continents, it is also a community institution, the primary source of care for those who live in the surrounding area. With the opening last year of its C.V. Starr Pavilion, the center has assured its continuing ability to provide the best and most efficient care for this community.

This new 11-storey building, housing ambulatory-care and diagnostic facilities, owes its construction largely to the great advances in medical technology of the past several decades. Between 1971 and 1981, the number of patient days spent in intensive- and special-care units at the New York Hospital — units like the burn center or coronary care unit — increased from about 5,000 to about 50,000, until they accounted for more than 10 percent of the hospital's total patient days. While this advancement in technology meant that we were better equipped than ever to deal with the most serious and complex disorders, it also meant that beds for more commonplace conditions — those that most often bring local people to the hospital — were scarcer. This trend called into question whether the hospital could meet the future needs of the community — as well as whether it could continue to give medical students an adequate experience of common disorders.

If advancing technology posed a potential problem, it also offered us a solution, since it permits us to treat many conditions with shorter hospital stays and some with no overnight stay at all. Newly developed radiologic procedures and new laboratory tests can be performed on an outpatient basis to obtain diagnostic information that once would have required hospitalization. New ultra-short-acting anesthetics that have minimal side effects have opened the way to an unprecedented expansion of ambulatory surgery. The result of these advances: increased potential for service with no increase in beds and no diminution in quality.

The building of the Starr Pavilion and the renovation of some 125,000 square feet of hospital space adjacent to it bring us into this new era of clinical endeavor. The construction of new inpatient and outpatient operating rooms; the relocation and modernization of radiologic and laboratory facilities; the installation of the latest communications and computer networks — all greatly expand our capacity to give quality care to people in the community, whether as inpatients or outpatients.

Equally important, the new pavilion enables us to improve on the clinic system that has been a major feature of our service to the community. In the traditional system a patient who made repeat visits to a clinic might see a different doctor each time. In the new system, to be fully implemented within the next two years, each patient is assigned an attending physician who has continuing responsibility to supervise and monitor his care, whether the care is provided by the attending personally or by graduate physicians under his supervision. Integrating in one setting what formerly were separate systems for private patients and clinic patients, the new set-up results in a more cohesive and efficient kind of ambulatory care, and, consequently, improved service to the community.

— Dr. David D. Thompson/Director, The New York Hospital

Dr. Robert Ellsworth, an attending ophthalmologist, uses a laser to dry up the blood supply to a tumor in the retina of a child's eye, as anesthesiologist Dr. David Susman looks on. Improvements in anesthesia permit the operation to be performed on an outpatient basis, whereas it formerly required hospitalization. A matter of hours after the procedure the happy patient savors a lollipop and heads home.

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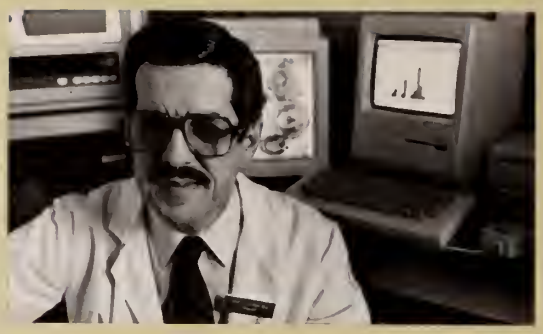


The most enjoyable teaching experience I know is to challenge students to think and see them grasp a concept that has eluded them. Ironically, as biomedical science has advanced, medical students have found themselves with fewer opportunities for thinking. As there comes to be more and more to learn, faculties institute more and more lectures and cram more and more into each one. Where the object should be to foster curious, active minds, medical curricula instead have forced students into more and more hours of passive listening, a national trend recently deplored by a special panel of the Association of American Medical Colleges.

At Cornell University Medical College, an extended faculty review of the curriculum arrived independently at a view similar to that of the AAMC panel. Thus, last year, after three years of thought and planning, major changes were instituted in the college's course of study. Stressing self-learning and problem-solving, the new curriculum reduces the amount of formal classroom instruction by 20 percent while increasing the amount of small-group teaching and the chances for independent study and research.

One of the most promising tools for self-learning, of course, is the computer. Recent technologic improvements have greatly enhanced the computer's value as a medical-educational tool, the most important being the development of interactive laser video disks that make it possible to integrate slides and other visual elements into the educational programs.

Since last year I have had the responsibility for developing a computer learning center for the new second-year course in pathology and pathophysiology. The Apple Computer Company generously donated 13 computer terminals as well as programming and video-disk equipment; with indispensable help from computer whizzes Steven Erle '86 and Andrew Diamond '88, we have developed an exciting array of self-learning and problem-solving programs.

Students have reacted very positively to the learning center, and peer schools have shown an encouraging interest. So well do centers like this one answer the current needs of medical educators, that the systems being developed here may turn out to be useful to other medical schools as well.

—Dr. Daniel R. Alonso Professor of Pathology

Left, medical students use the computer learning center recently developed for the college's new combined course in pathology and pathophysiology. Right, second-year student Erica New pays a visit to one of her summer-internship clients, Mrs. Alice Grant.

Gerontology Internship

Since the elderly are the major users of health-care professionals' time, it is important for beginning medical students to get to know them not merely in the hospital, where they may be very ill or disoriented or unresponsive, but in their normal life settings. We wanted our students to get daily exposure to elderly people and to the resources available to them. And we wanted this to happen before the students became totally involved with the medical and technical aspects of their education.

Three years ago, in cooperation with five excellent neighborhood social-service agencies, we established a six-week summer gerontology internship program for pre-clinical medical students, the only one of its kind in the country. Some 50 students have participated in the program, each of whom has received a $1,500 stipend made possible through the generosity of the Isaac H. Tuttle Fund, the New York Community Trust, and the Jean and Louis Dreyfus Foundation.

Under agency supervision, the students get involved in every aspect of the lives of 10 to 15 clients assigned to them. They visit them at home, go shopping with them, fill out complicated food stamp and Medicaid forms, take patients to doctors and clinics, accompany meals-on-wheels deliveries, escort groups to museums, and in general develop sensitivity to the needs of a population with whom most have had little extended contact. Students record their discoveries, triumphs and frustrations in diaries and meet at weekly seminars with invited faculty or extramural experts to discuss their experiences.

Many indicators point to the success of this program. Perhaps its value is best summarized by what one of the medical students wrote: "I'll never look at an older patient in a waiting room, in a bed, or in a corridor without first trying to think, 'What is the home situation, what is the family situation, and where are you going when you leave here?' "

—Alice Ullmann | Clinical Associate Professor of Public Health and Medicine

Nothing I learned in nursing school prepared me for the reality of dealing with AIDS patients, because the problem was just getting started then. When I came here as a staff nurse two years ago and found I'd have from one to five AIDS cases at any given time, my reaction was genuine curiosity, because this medical center is a mecca for new medication and treatments. I felt it was an opportunity to learn a lot and give a lot, frightening though the disease might be.

We deal with many patients who have terminal illnesses, but AIDS has such a strong social stigma that it makes its victims outcasts at a time when they need compassion and support the most. While AIDS patients have a special, demanding set of emotional and physical needs, we try to make them feel accepted as individuals, and to let them know we care very much about what happens to them.

Most of the AIDS patients I take care of are gay, and many have spent their lives hiding this from their families and co-workers. When they come to the hospital, they have to admit to the outside world for the first time what they are. Sometimes it brings people together, and other times it's just the opposite. I've seen people die completely alone without one visitor at the end, and I guess I'm especially drawn to them because they need me so much. I don't think anyone should die alone, and I feel it's my responsibility to let them know that I care about them.

I also feel that, as a nurse, it's my responsibility to set an example for some of the other people in the hospital who may have cultural prejudices or fears. Caring for AIDS forces you to face up to your own personal attitudes about homosexuality and drug abuse, especially when you're exposing yourself to an epidemic about which there are no definite answers. AIDS patients are incredibly sensitive to how people are reacting to them, and they know instantly how you feel. That's why it's so important when you walk into that room to be genuine, because if they sense that you're frightened or uncomfortable or disapproving, they'll tighten up and you'll never know them or be able to help them. Imagine how terrible it is when your family and friends abandon you, or the staff in a hospital avoid you, or every time they touch you they're wearing a rubber glove. I know there are times when these patients are just longing for the human touch, for someone to hold their hand without a glove. So even though I have to protect myself a lot of the time, if I'm just going in to say good morning or to take blood pressure, I don't wear gloves.

There's no question that this kind of job is physically and emotionally draining. There are some days when I feel at the end of my rope — depressed, frustrated, afraid, exhausted, or just plain angry. Most of my AIDS patients are so intelligent, likeable and talented — photographers, architects, artists — and it's so tragic because they're almost as young as I am and haven't had a chance to live. But you have to put things in perspective and keep going. And there are inspiring days, when you make a good connection and give your patients a little of the hope that is so vital to all patients no matter what their illness.

— Lisa Duca, Staff Nurse, Payson 5

With an AIDS patient in the solarium on Payson 5. The patient is recovering from Pneumocystis carinii pneumonia, an opportunistic infection that often occurs in AIDS cases.

Corporate Care System

Recently a 50-year-old man at a large New York corporation had a heart attack in his office. Ordinarily his secretary might have called 911 and waited anxiously for an ambulance. Because his company belonged to the NYH-CMC Corporate Care System, a company employee who had been trained by our staff began cardiopulmonary resuscitation, while a call was placed to a special 24-hour private number linked directly to our emergency room's paramedic service. A dispatcher punched the company's account number into a computer, and, armed with precise details about the building, entrance, and elevator system, a rescue team arrived, stabilized the patient, and brought him to the hospital. In the process they connected him to a telemetry device that broadcast his vital signs to physicians in the hospital and enabled them to give instructions to the paramedics. All care up to the patient's day of discharge was coordinated by the Corporate Care System.

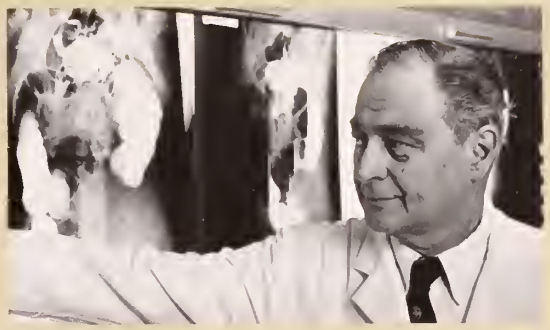
Inaugurated last year, the system puts the hospital's full range of services at the disposal of corporations, organizations, and large-membership groups in the metropolitan area. When a company signs up, all employees get membership cards that on one side list a private emergency number and on the other list a health-assistance number for non-emergency problems and routine care. In addition, the system offers training programs in cardiopulmonary resuscitation, first aid, corporate aviation safety, and advanced cardiac life support.

In one year, 70 corporations have brought 70,000 employees into the system. Our goal by the end of 1986: 100 corporations and 100,000 employees.

—Dr. Melville A. Platt, Deputy Director, The New York Hospital

Left, Nicholas Eastman of the Corporate Care System conducts a class in cardiopulmonary resuscitation at one of the 70 corporations enrolled in the system. Right, New York Hospital residents Drs. Steven Parker, right, and Neil Friedman in the intensive care unit of Jamaica Hospital.

Serving Low-Income Areas



In addition to educating more than 400 medical students at any given time, the New York Hospital-Cornell Medical Center provides graduate medical education to more than 450 beginning doctors. Depending on their specialties, these house-staff physicians devote from three to seven years to this phase of their training. The positions are keenly sought after: last year, for example, our surgery program received about 1,500 applications for 15 openings.

This is the critical time when the young physician not only gains specific skills but develops a broad perspective on his field that remains with him throughout his career. Thus, the nation's professional societies and teaching hospitals have worked together to make American graduate training the best in the world.

The quality of this system notwithstanding, a serious problem has been that many hospitals in low-income areas find it difficult to attract graduates of American medical schools into their residency programs. Academic medical centers like this one clearly can help deal with this problem — and, in fact, we have been helping. Since 1979, New York Hospital residents have served as the surgical house staff for Jamaica Hospital, a 282-bed community hospital in a low-income area of Queens. Two teams consisting of three residents each provide continuous, round-the-clock surgical coverage, putting their skills to work in the hospital's emergency department, operating rooms, and surgical clinic.

The program has benefitted both institutions, but, of course, the greatest benefit has been for the south Jamaica community itself. The medical center's recent affiliation with the Catholic Medical Center of Brooklyn and Queens opens up still further opportunities to strengthen medical care in other poor sections of the city. We have not only the will to do so but confidence in the quality of what we have to give.

—Dr. G. Tom Shires/Surgeon-in-Chief, The New York Hospital

The idea that patients are proper objects of scientific investigation was still new in 1913, when the Russell Sage Institute of Pathology established one of the country's first units for clinical investigation at Cornell University Medical College. Today, when patient studies are carried on throughout this medical center, there remains a facility devoted specifically to this research. In some ways, its greatest changes have occurred within the past few years.

Funded since 1960 by the National Institutes of Health, from which it currently receives $2 million a year, the Clinical Research Center comprises a 10-bed unit for adults and a six-bed unit for children. Medical investigators from all disciplines admit patients and volunteer subjects to the CRC to study various disease processes or initiate new modes of treatment. Both the adult and children's units have special personnel and facilities to assist clinical research — permanent well-trained nursing staffs, diet kitchens, special procedure rooms, outpatient offices, supporting laboratories, and the CLINFO computer center, established one year ago.

Until recently, virtually all patients admitted to the CRC had disorders of long standing, often rare diseases that offered unusual opportunities for insight into body functions. While such studies continue today, research at the adult CRC deals increasingly with acute conditions, such as chronic heart failure, metastatic cancer, AIDS, and acute problems associated with diabetes. The recent assignment of graduate staff to this unit means that a physician is present at all times if a very sick patient urgently requires attention. In addition, young biomedical scientists with special skills in clinical research will be recruited as Cornell Scholars during the coming year, bringing a new measure of expertise to the difficult task of studying severe illness.

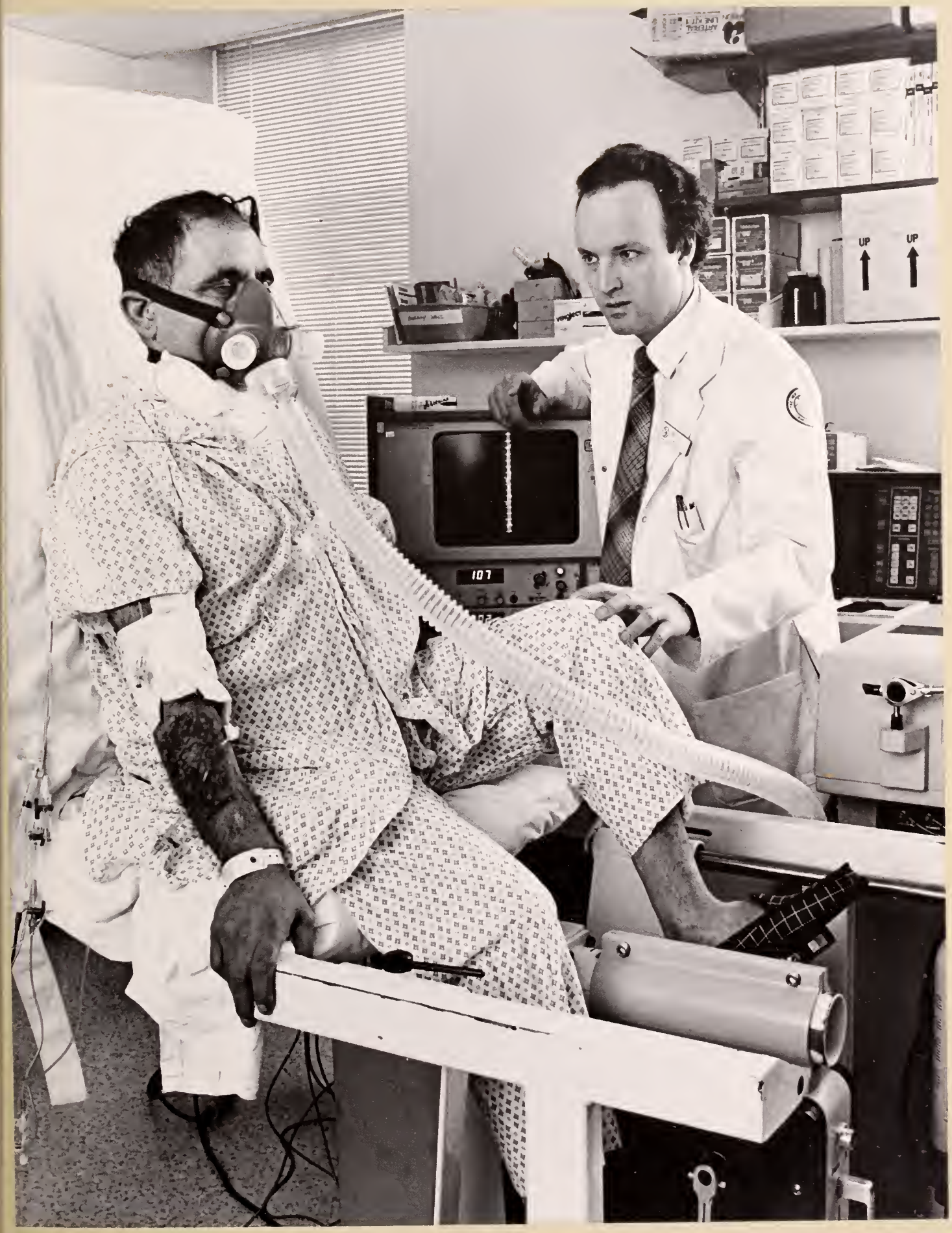
CRC's new emphasis on acute disorders derives from the great advances occurring today in biomedical science and the need to translate them as quickly as possible into improved care for patients. Thus, last year physicians in the adult unit were among the first to evaluate the physiologic significance of a recently characterized hormone produced by the heart. Scientists at NYH-CMC had been involved in purifying, sequencing, and synthesizing the substance, which is made in the atria of the heart and which has powerful effects on blood pressure and salt and water regulation. Last year they began administering the synthetic hormone to normal volunteers and to patients with moderate to severe chronic heart failure in a series of studies that promises to shed considerable light on the value of this atrial natriuretic factor as a therapeutic agent.

With more than $1 million devoted to AIDS research at the medical center, eight protocols relating to AIDS were carried out at the CRC during 1985. Most were trials of agents with potential to mitigate the disease, among them gamma interferon, recombinant human interleukin-2, ribavirin, and Fansidar. Other studies entail careful monitoring and periodic evaluation of outpatients who are at high risk of developing AIDS.

In all, patients or volunteers participated in 78 protocols at the CRC in 1985, 46 in the adult unit and 32 in the children's unit. One hundred sixteen journal articles or other publications appeared in the course of the year, and 62 others were in press. Constituting a valuable fund of new knowledge, they also reflect a new determination that the best care for desperately ill patients be compatible with the careful precision of clinical science.

—Dr. Robert G. Campbell Program Director, Adult Unit, General Clinical Research Center

Dr. Robert Cody, associate program director of the Clinical Research Center's adult unit, monitors a patient's cardiac function.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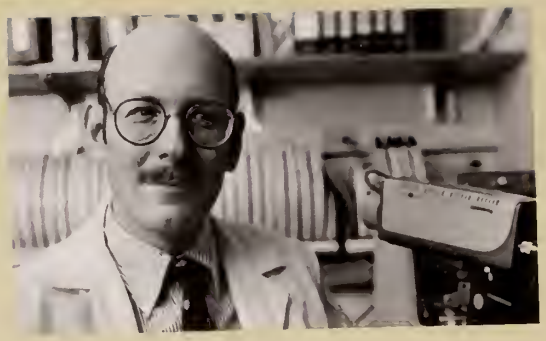


Being the most complex and inaccessible human organ, the brain has also been the slowest to yield its secrets. What may be the most promising new tool to unlock them is called PET — positron emission tomography. In PET scanning, a patient is injected with a radioactively labelled substance, and an array of crystal detectors — programmed like those in a CAT scanner — furnishes an image of the emitted radiation, localizing it with a resolution that, in new scanners, approaches three millimeters. Depending on the substance injected, PET scanning can provide information on a wide variety of brain activities, including glucose and oxygen metabolism, blood flow, capillary permeability, and tissue acidity or alkalinity.

The PET Center at Memorial Sloan-Kettering Cancer Center, a joint program with NYH-CMC, is one of only six PET centers in the country funded by the National Institutes of Health. Now five years old, it has permitted us to look directly at the biochemistry of human brain tumors and at the drugs used to treat them. In one recent study, for example, PET revealed for the first time in humans that brain tumors are slightly more alkaline than normal brain tissue, a finding of importance for the chemotherapy of these tumors. Another very different line of research, begun recently, seeks improved understanding of coma and other kinds of extreme brain damage through measurements of cerebral metabolism and blood flow.

PET takes us beyond the limits of laboratory brain science to direct studies of human subjects. The excitement of our research derives not only from its inherent interest but from the sense that this new technology has only begun to be explored.

—Dr. David Rottenberg/Associate Professor of Neurology, Cornell University Medical College

Left, preparing for a scan at the PET Center. Right, construction of the Helmsley Medical Tower at the New York Hospital–Cornell Medical Center, a 36-storey multipurpose building scheduled for occupancy in 1986.

Planning and Building

Recently I talked with a young scientist new to the medical center. After expressing his enthusiasm for his newly renovated lab and his basic-science colleagues, he changed the subject. How fortunate, he said, that the medical college had been able to get him an apartment in the neighborhood. On his salary he could not afford the local rents, and he had to live nearby, since he commonly worked to the midnight hours and on weekends. Moreover, it was crucial that he attract post-doctoral fellows to his lab, and nearby housing would be as vital for them as it was for him.

The conversation illustrates both the breadth of the medical center's needs and the challenge of meeting them in a neighborhood where every inch of space is at a premium. Because the center is more than a half century old, new laboratories, new clinical facilities, new housing are all essential — and, while we have made good progress in building them, we take none of it for granted. Being an institution of the first rank requires us to provide amenities due to people of brilliance, talent, and dedication. But it also means asking tough questions about every project that gets proposed, balancing one need against another. It means seeking every opportunity to cooperate with adjacent institutions on York Avenue. It means doing more for less, as in our new C.V. Starr Pavilion, a facility for cost-effective, ambulatory care.

None of this is simple, but perhaps we are better for that. Planning and building ought to test our cohesiveness and creativity, our ability to make the whole more than the sum of the parts, to establish partnerships within the center and with outside institutions and agencies.

One hears much nowadays about government constraints on medical institutions. We need discipline not because government says we do but because discipline is an essential feature of creative leadership. We owe nothing less to our growing constituency of friends and supporters — indeed, to all who look to us as an engine of medical progress.

—Frank Markoe Jr./Vice Chairman for External Affairs

Ten years ago in the journal *Science*, Dr. Julius Comroe of the University of California and Dr. Robert Dripps of the University of Pennsylvania sought to answer a question often opined about but never resolved with precision. To what extent, they asked, do major advances in clinical medicine derive from basic research — that is, research undertaken in a general quest for knowledge and not as a means of solving a particular clinical problem?

Comroe and Dripps devoted several years to collecting and reading thousands of articles related to a single broad field with which they were familiar, cardiovascular and pulmonary disease. Through an exhaustive process of analysis and consultation, they identified over 500 key articles that paved the way for 10 major clinical advances in this field since World War II — advances like cardiac surgery and intensive care units. In 41 percent of those key articles, they concluded, the investigators "expressed no interest in a clinical problem — their goal was knowledge for the sake of knowledge."

The subsequent decade has furnished perhaps even more dramatic evidence of the importance of basic biomedical research. This decade has witnessed the initial application to clinical medicine of a growing body of knowledge on how cells operate at the molecular level, how the basic machinery of genes, proteins, and other molecules accounts for a myriad of cell functions. Since it is likely that molecular biology will continue to be the principal source of progress in medicine for the next decades, a major thrust at the medical center in the 1980s has been to strengthen our programs in this exciting field.

Progress has been notable. For example, the appointment of Dr. Donald Fischman to head the department of cell biology and anatomy has been followed by a sevenfold increase in that department's research funding, and this at a time of uncertain federal support for biomedical research. The more recent appointment of Dr. Kenneth Berns to head the department of microbiology will have a similar impact, we believe, on its research effort.

Key to these encouraging developments are new facilities made possible by friends of the medical center — Mr. Stavros Niarchos, who funded the renovation of the cell biology laboratories; the Hearst Foundation, which did the same for the microbiology laboratories. We will soon break ground for the William and Mildred Lasdon Biomedical Research Center, which will be crucial to our entire future basic-science effort.

Finally, the center has made great progress in attracting and fostering outstanding young scientists during the early, critical years of their professional development. Through a gift of $50 million from an anonymous donor in 1983, funds have become available to strengthen greatly the center's Ph.D. and M.D.-Ph.D. programs and to inaugurate the Cornell Scholars Program, which now provides $200,000 over three years to each of five young teacher-scientists at the medical center. This program represents an unequaled opportunity to bring new ideas and vigor to research at the medical college and is the single most important advance in strengthening the faculty at a junior level. At a time when federal research support is increasingly difficult to obtain, all these initiatives can only engender confidence in the center's future capacity for leadership in basic biomedical science and benefit the teaching, research and patient care missions of the medical center.

— Dr. Thomas H. Meikle Jr., Dean, Cornell University Medical College

Cornell Scholar Dr. Daniel Nachshen, an assistant professor of physiology, works in his laboratory with technician Daniel Bracacescu. The Cornell Scholars program provides three years of funding at the medical center for young teacher-scientists, with up to five chosen each year

January: Dr. G. Tom Shires, surgeon-in-chief, succeeded Dr. Joseph F. Artusio Jr., anesthesiologist-in-chief, as president of the hospital's medical board. Dr. George Reader, chairman of the department of public health, succeeded Dr. William Ledger, obstetrician- and gynecologist-in-chief, as secretary. . . Dr. Robert G. Campbell, a noted investigator in metabolism and clinical nutrition, was appointed director of the adult unit of the Clinical Research Center.

February: The center marked passing the halfway point in its $300 million capital campaign Dr O Wayne Isom, an internationally renowned surgeon, was named chairman of the division of cardiothoracic surgery in the department of surgery.

March: The third edition of Cabaret!, starring Dolly Parton and chaired by Walter B. Wriston and Mrs. Milton Petrie, raised more than $1.3 million for the medical center. . . John F. McGillicuddy, chairman of the board and chief executive officer of Manufacturers Hanover Corporation and Manufacturers Hanover Trust Company, was elected to the board of governors of the Society of the New York Hospital. . . Announcement was made of a commitment of $500,000 by Iris and B. Gerald Cantor towards the building of an ambulatory surgery area in the New York Hospital. . "The U.S. Health Care System: A Look to the 1990s" was the subject of the first Cornell University Medical College Conference on Health Policy. With Dr. Eli Ginzberg, of Columbia University, serving as chairman, more than 40 scholars from universities, the medical profession, the health care industry and government discussed the future of American health care. . . Dr. Jacqueline Lofaro, a sociologist, was appointed director of the newly created department of community relations at the medical center. . . At the annual Caduceus Society dinner of the CUMC Alumni Association, honorary fellowships were bestowed on Dr. Robert Michels, chairman of the department of psychiatry, and Dr. Isadore Rosenfeld, clinical professor of medicine. The Center Alumni Distinguished Achievement Award went to Dr. Elizabeth D. Hay, chairman of the department of anatomy and cellular biology at Harvard Medical School. A new award for distinguished achievement in nursing was bestowed on Martha L. Orr, executive director of the New York State Nursing Association.

From left, Dr. Robert Hickey (May), Richard Tucker (July), and past and present Greenberg Award winners Drs. John Deitrick, E. Hugh Luckey, Joseph Artusio, and Bronson Ray (April).

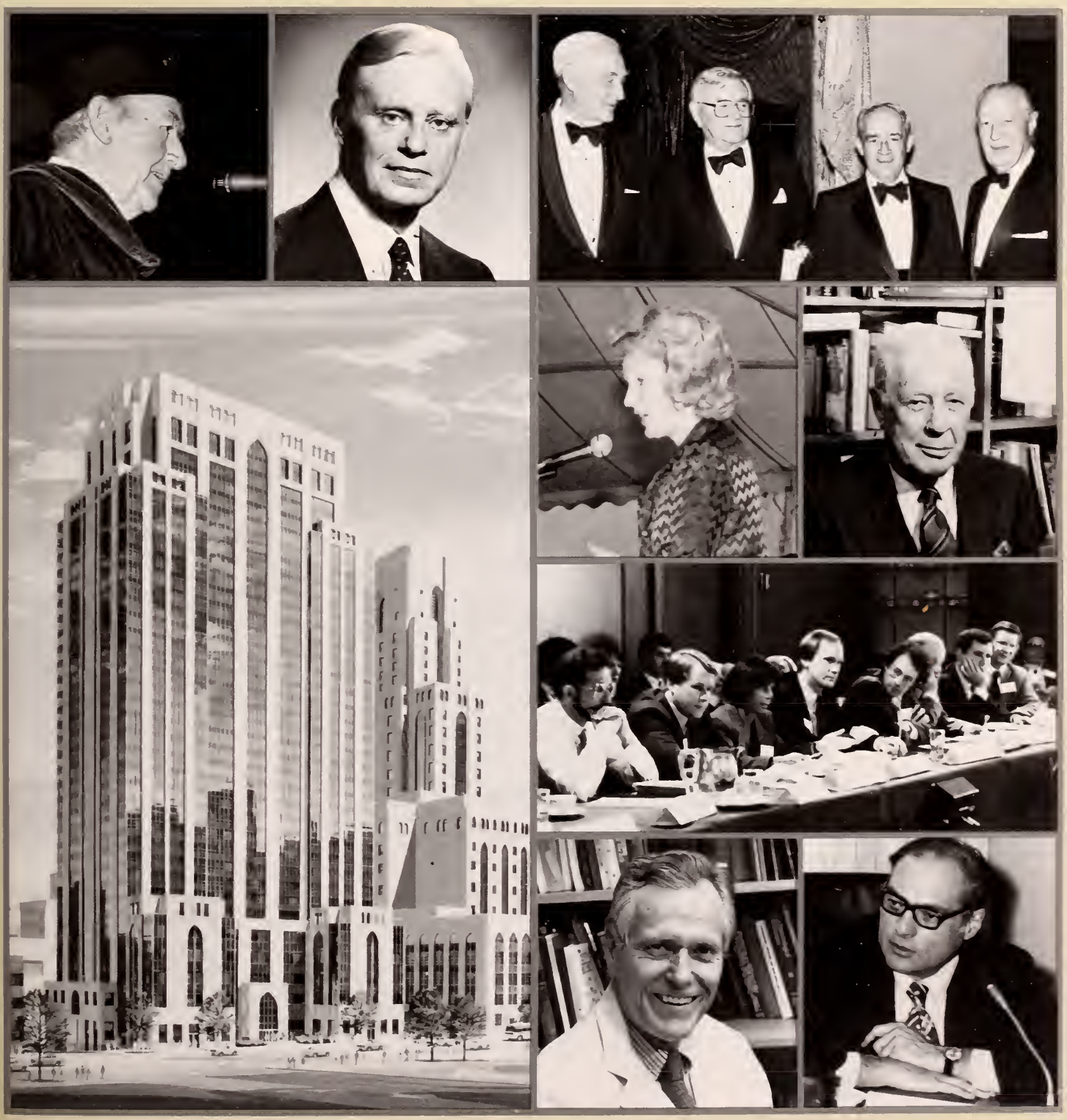
Right, artist's rendering of the Helmsley Medical Tower at the New York Hospital-Cornell Medical Center (December).

April: The atrium of the C.V. Starr Pavilion was dedicated in honor of Maurice Greenberg, a member of the hospital board of governors and chairman of the Starr Foundation. . . The 1985 Greenberg Award, in recognition of distinguished service to the medical center, was awarded to Dr Artusio and posthumously to Dr. George Papanicolaou, principal developer of the Pap test. . . Dr. Charles L. Christian, director of the division of rheumatic diseases of the department of medicine, was named the first Joseph P. Routh Professor of Rheumatic Diseases in Medicine. The professorship derives largely from a bequest by the late Mr. Routh, a leading executive in the American coal industry.

May: A research training endowment to provide $200,000 annually was granted to the department of psychiatry by the Lakeview Fund, Inc., a charitable foundation established by the late DeWitt Wallace, founder of *Reader's Digest*. The endowment funds three staggered research fellowships in the department. . . At the medical college's annual convocation, Dr. Rudolph Leibel, an associate professor of clinical pediatrics, received the Elliot Hochstein Teaching Award for the second year in a row, thereby becoming the first member of the faculty to win the award

Far right, clockwise from top, Dr. Tenley Albright (September), Dr. B.H. Kean (October), Cornell Conference on Health Policy (March), Dr. Gerald Klerman (October), Dr. Charles Christian (April).

twice. . One hundred thirty-four academic degrees—110 M.D.s, 21 Ph.D.s, and three M.S.s—were awarded at Cornell University's 88th medical commencement, held in Carnegie Hall The 1985 Alumni Award of Distinction was presented to Dr. Robert C Hickey '42, a leader in surgical oncology. . . A gift from the Rosenfeld Heart Foundation provided equipment for continuous monitoring of heart patients on a regular inpatient floor. . . The medical college received a grant of $341,000 from the W.K. Kellogg Foundation to expand an innovative program aimed at fostering greater cost consciousness on the part of physicians.



June: The Revlon Suite, a specially designed inpatient suite, was dedicated. . . Dr. Wan Ngo Lim, a distinguished pediatric cardiologist, who helped develop the first effective treatment for rheumatic heart disease, retired after 30 years of service to the medical center.

July: Beatrice Seaver made a commitment of $900,000, in honor of her late husband, Samuel A. Seaver, to construct and equip state-of-the-art research laboratories in the department of medicine . . Richard F. Tucker, previously vice chairman, assumed the chairmanship of the board of overseers of the medical college and graduate school of medical sciences. Joining the board as a member was Lilyan H. Affinito, a university trustee since 1981.

September: More than 400 women attended the third annual Symposium on Women's Health, with Dr. Tenley E. Albright, a former Olympic gold medal figure skater who is now a surgeon, as keynote speaker . . Dr Robert W. Selfe, chairman of the department of otorhinolaryngology, was the principal speaker at opening exercises marking the beginning of the new academic year. . Implementation began of a revised curriculum at the medical college, after three years of planning. . Sanford B. Ehrenkranz, a prominent tax attorney, and Raymond R. Herrmann Jr., retired vice chairman of McKesson Corporation of San Francisco, became members of the board of overseers. . A new professorship in tropical medicine was established to honor Dr. B. H. Kean, clinical professor emeritus of medicine.

October: Dr Gerald Klerman, an authority on the epidemiology of psychopathology and treatment of affective and anxiety disorders, was appointed to the new position of associate chairman for research in the department of psychiatry.

November: Announcement was made of the establishment of a new clinical, research, and training facility devoted to eating disorders. Developed in response to the growing incidence of such disorders and the lack of specialists and trained investigators in this field, the institute is located at the medical center's Westchester Division. . Some 400 friends of the department of psychiatry gathered at Sotheby's for the first Benefit for Psychiatric Research. . . Rock singer Madonna paid a surprise visit to pediatric patients during the Thanksgiving holiday. The star spent over an hour with children in the child life center and on patient floors. . . Dr. William N Christenson, director of the personnel health service and associate professor of clinical medicine, announced his retirement after more than 30 years of service at the medical center.

December: Dr Shires received the 1985 Sheen Award, one of the most prestigious awards in American medicine. . . Hays Clark, a hospital governor, made a commitment for a gift of $1 million to the medical center. . . Marie Strickland, head of obstetrical, gynecological, and pediatric nursing, announced her retirement after more than 20 years of service at the medical center. . Ceremonies marked the "topping out," or completion of the superstructure, of the hospital's new 36-storey residence building, to be named the Helmsley Medical Tower at the New York Hospital–Cornell Medical Center.

The New York Hospital–Cornell Medical Center's $300-million capital campaign, as of April 1986, totalled more than $226 million in gifts and pledges from individuals, foundations, and corporations.

This amount reflects the extraordinary gift of $33 million from Mr. and Mrs. Harry B. Helmsley to the New York Hospital to support a major modernization program. In recognition of their generosity, a 36-storey building now under construction will be named "The Helmsley Medical Tower at The New York Hospital–Cornell Medical Center." The Helmsley Medical Tower will provide apartments for nurses and other medical center staff as well as short-term housing for out-of-town patients and their families. This gift includes a $3-million endowment for our world-renowned cardiovascular center, headed by Dr. John H. Laragh. The cardiovascular center also will be named for Mr. and Mrs. Helmsley, who have provided support for Dr. Laragh's work for many years.

The campaign on behalf of the William and Mildred Lasdon Biomedical Research Center, made possible by a $7.5-million leadership gift from the late Mr. Lasdon and from Mrs. Lasdon, was given further impetus by the development committee of the medical college's board of overseers, chaired by Daniel P. Davison.

Highlights of the campaign also included $1 million to the medical center from NYH governor Hays Clark and $1 million from Mrs. Samuel A. Seaver and the late Mr. Seaver to establish laboratory facilities in cardiopulmonary research and cancer immunology. Mrs. Seaver has provided special leadership as a member of the newly formed development executive committee for the Lying-In Hospital and as a member of the Medical Center Advisory Board (MCAB).

Successful fundraising projects included the new B. Gerald and Iris Cantor Ambulatory Surgery Center. In addition to a major gift from Mr. and Mrs. Cantor, support was received from the Barker Welfare Foundation, NYH life governor Benjamin Clark, the Bodman and Achelis Foundations, The Bristol-Myers Fund, Inc., and the Archbold Trust.

Through contributions from friends and patients, an endowed professorship in tropical medicine has been established in honor of Dr. B.H. Kean. The Joseph P. Routh Professorship of Rheumatic Diseases in Medicine was funded by a bequest from the late Mr. Routh and from Mrs. Routh.

Unrestricted giving to the medical center reached $4,885,716, a 27 percent increase over the previous year's total.

Gifts by Individuals. Besides the magnificent gift from Mr. and Mrs. Helmsley, gifts from individuals totalled more than $13 million. Among the major donors were: Ivan F. Boesky, Mrs. Helen W. Buckner, Jack Castiglia, Mr. and Mrs. Maurits Edersheim, Charlotte Ford, Patricia S. Gilbert, Maurice R. Greenberg, Mrs. John Hadges, Irving Holtz, Peter S. Kalikow, Mrs. William Lasdon, Robert Liberman, Mr. and Mrs. John L. Loeb, Stanley de J. Osborne, Mr. and Mrs. Milton Petrie, Richard J. Schmeelk, and Josephine Sokolski.

Bequests and Planned Gifts. More than $6.1 million in bequests and planned gifts was contributed, including $2.5 million for the hospital and $3.6 million for the medical college. Especially significant were bequests from the estate of Nathan Cummings for an endowed professorship in the department of neurology and $1 million for facilities and equipment for the cardiac diagnostic facility and for general hospital purposes. Also received was more than $900,000 from the estate of Peter S. Heilperin for general hospital purposes.

Foundation Giving. Foundation giving to the campaign now totals $45 million, with more than $10 million committed in the past year. Of special significance were gifts from: the Reader's Digest/Lakeview Fund, Inc., to the department of psychiatry for a research training

endowment; the Rosenfeld Heart Foundation to the department of medicine and to medical college programs; the W.K. Kellogg Foundation to expand a cost-containment study; the G. Harold and Leila Y. Mathers Charitable Foundation for immunological studies; the Eleanor Naylor Dana Charitable Trust for research in cardiovascular immunopharmacology; and the Horace Goldsmith Foundation for work in molecular endocrinology. Additional M.D.–Ph.D. fellowships were funded through the generosity of the W.M. Keck Foundation, the Abby Rockefeller Mauzé Charitable Trust, the André and Bella Meyer Foundation, and the Mildred and Emil Holland Philanthropic Fund.

Other major gifts were received from the following foundations: George F. Baker Trust; Children's Blood Foundation; James J. Colt Foundation, Inc.; Commonwealth Fund; Charles A. Dana Foundation; William H. Donner Foundation, Inc.; Fischbach Foundation; L.W. Frohlich Charitable Trust; William T. Grant Foundation; John A. Hartford Foundation, Inc.; William Randolph Hearst Foundation, Inc.; The Hexter Foundation, Inc.; Benjamin H. Homan Jr. Charitable Trust; Carl C. Icahn Foundation; Robert Wood Johnson Foundation; Robert Wood Johnson Jr. Charitable Trust; Henry J. Kaiser Family Foundation; David Koch Charitable Foundation; Jacob and Valeria Langeloth Foundation; McKnight Foundation; Andrew W. Mellon Foundation; Kathryn and Gilbert Miller Fund, Inc.; Oxnard Foundation; Charles H. Revson Foundation; Fannie E. Rippel Foundation; Helena Rubinstein Foundation; Sackler Foundation; A. & A. Sinsheimer Foundation; The Starr Foundation; Frederick J. and Theresa Dow Wallace Fund; Marcus and Amalia Wallenberg Foundation; Whitaker Foundation; Harry L. Winston Research Foundation, Inc.; Norman and Rosita Winston Foundation, Inc.; Marie and John Zimmermann Fund, Inc.

Mr. and Mrs. Harry Helmsley, Mrs. William Lasdon, Sanford Ehrenkranz

Bernadette Castro Guida, Mr. and Mrs. B. Gerald Cantor, Mrs. Samuel Seaver, Peter Kalikow

Corporate Contributions. Corporate contributions now total $22 million, with $4.3 million received in the past year. Generous unrestricted support was given by Manufacturers Hanover Trust Company, Chase Manhattan Bank, N.A., Phibro-Salomon, Inc., and The Bristol-Myers Fund, Inc. The Morgan Guaranty Trust Company and the New York Telephone Company, with an initial commitment from The Clark Foundation, made substantial donations toward the modernization of the department of obstetrics and gynecology's ambulatory-services area.

Additional support was received from the following corporations: American Cyanamid Company; American Hoechst Corporation; Burroughs Wellcome Company; California Biotechnology, Inc.; Citibank, N.A.; Dyson-Kissner-Moran Corporation, Inc.; Exxon Corporation; General Foods Fund, Inc.; Hoffman-LaRoche, Inc.; Imclone Systems, Inc.; Knoll Pharmaceutical Company; Eli Lilly & Company; Lorex Pharmaceuticals; Merck & Company, Inc.; Personal Products; E.R. Squibb, & Sons, Inc.; Stuart Pharmaceuticals; Syntex USA, Inc.; Technicare Corporation; Union Pacific Corporation; Upjohn Company; Viratek, Inc.; and Warner Communications, Inc.

Mrs. John Hay Whitney, Mrs. D. Dixon Boardman, David Wallace, R. Palmer Baker

Private-sector research grants totalled $9.5 million. These grants reflect the renown of our physicians and scientists for excellence in scientific investigation.

Under the chairmanship of Mrs. L. Patton Kline, a member of the MCAB, the center's annual giving committee continued to provide special counsel on the public mail appeal and to oversee the integration of other annual-giving programs. Partners in Medicine, those donors who give $1,000 or more annually, played an important role in the expansion of annual support to the medical center. Under the acting chairmanship of Jansen Noyes Jr., an administrative board is being formed to extend substantially the participation of the community in Partners.

Hays Clark, Charlotte Ford, Lois Beekman Ehrenkranz, Payne Whitney Middleton, Barry Osborn

The Cornell University Medical College Fund raised from alumni and faculty a total of more than $700,000 in both unrestricted and restricted support for 1984-85.

Under the new presidency of Mrs. B.H. Kean, the Auxiliary of the Society of the New York Hospital has continued its seed support of several critical hospital projects.

Other Development Activities. An outstanding initiative was the formation of the development executive committee for the Lying-In Hospital under the leadership of Mrs. Ronald P. Stanton, chairman, and Mrs. B. Gerald Cantor, vice chairman, both members of the MCAB. This committee is comprised of prominent New York women working to secure the resources necessary for the department of obstetrics and gynecology.

Walter Wriston, Mr. and Mrs. Milton Petrie, Mrs. Ronald Stanton

NYH governor William Tavoulareas will head up a new $5-million drive for the burn center. NYH governor David Wallace is continuing his efforts to strengthen the department of psychiatry's development activities. In addition, the department of psychiatry has established a chairman's committee for special research, chaired by Robert Liberman. Bob Hope will chair an eye advisory council now in formation for the department of ophthalmology.

Peter S. Kalikow, a member of the MCAB, continues to lead the pediatric development effort. Sandy Jaffee chaired a special initiative on behalf of the pediatric cardiology division.

Cabaret!, the yearly gala benefit for the medical center was held on March 19, 1985, and was an outstanding success. Entertainment was provided by country and western star Dolly Parton. Co-chaired by Mrs. Milton Petrie and Walter B. Wriston, the event brought in over $1.3 million.

In April and November, Dr. R. Gordon Douglas Jr., chairman of the department of medicine, and Mrs. C. Payson Coleman, a member of the MCAB, co-chaired very successful Visitors Day programs.

Co-chaired by Mrs. Ronald P. Stanton and Mrs. John Elliott Jr., the third annual Symposium on Women's Health, on September 26, 1985, was attended by more than 400 women leaders in business, the professions, and the community. The keynote address was given by Dr. Tenley Albright, the Olympic gold medalist skater, now a surgeon in Boston.

On November 12, 1985, the department of psychiatry held its first benefit, "Windows on the Mind," at Sotheby's. Leadership was provided by the event's chairmen, Mrs. William Osborn, Payne Whitney Middleton, and Lois Beekman Ehrenkranz.

Chaired by NYH governor James H. Evans and composed of outstanding business, professional, and community leaders, the Medical Center Advisory Board welcomed several new members, including Ralph M. Baruch, Mrs. D. Dixon Boardman, Edgar Eisner, Milton A. Gordon, and Robert B. Kavner.

The Departmental Associates, leading New Yorkers with interests in medical education and research, enhanced its programs under the direction of CUMC overseer Sanford B. Ehrenkranz and the administration of Dr. Marcus Reidenberg, professor of pharmacology and medicine.

Dr. David D. Thompson, director of the hospital, and Dr. Thomas H. Meikle Jr., dean of the medical college, have given remarkable support to our development activities.

Frank Markoe Jr., vice chairman for external affairs for the medical center and chairman of the center's Major Gifts Committee, continues to provide special leadership in meeting our campaign objectives. We are grateful to him and to the members of the medical center's development and public affairs departments for their tireless support of all our efforts.

We particularly appreciate the assistance of our staff physicians and scientists and our voluntary physicians in securing many of the gifts received during the campaign.

We close with thanks to the hospital's board of governors and the medical college's board of overseers, the Medical Center Advisory Board, the Departmental Associates, alumni, volunteers, and other good friends who worked so hard for the center in 1985. With their continuing advocacy, the New York Hospital–Cornell Medical Center will soon reach its $300–million campaign goal and strengthen its leadership in patient care, education, and scientific research.

Eleanor T. Elliott

Eleanor T. Elliott
Governor,
The Society of the New York Hospital

Jansen Noyes, Jr.

Jansen Noyes Jr.
Life Overseer,
Cornell University Medical College

The Society of the New York Hospital, January 1—December 31, 1985

Revenues	$ Millions	%
Net Inpatient Revenue	261.9	86.0
Net Outpatient Revenue	26.0	8.5
Other Operating Revenue	12.3	4.1
Specific Purpose Funds Used to Support Current Operations	4.2	1.4
Total	$304.4	100.0%
Expenses		
Salaries, Wages and Benefits	194.4	62.9
Medical and Surgical Supplies, Pharmaceuticals & Other Expenses	76.3	24.7
Medical Malpractice and Other Insurance	7.9	2.6
Depreciation, Interest, Leases and Amortization	30.4	9.8
Total	$309.0	100.0%
Operating Loss	$4.6	
Investment Income and Unrestricted Gifts	$6.2	
Balance Available for Required Equipment Replacement, Building Renovation, New Services, New Hospital Expenses, Etc.	$1.6	

Cornell University Medical College, July 1, 1984—June 30, 1985

Revenues	$ Millions	%
Tuition and Fees	6.3	4.4
Investment Income	8.0	5.5
Restricted Funds for Research and Training	35.2	24.4
State Appropriation	1.3	1.0
Indirect Cost Reimbursement	8.3	5.8
Faculty Practice Plan	71.8	50.0
Other Sources	13.1	9.1
Total Revenues:	$144.0	100.0%
Expenses		
Instruction and Research Training	10.9	7.6
Research	31.3	21.7
Libraries and Academic Support	2.5	1.7
Student Services and Student Financial Aid	4.0	2.8
General and Administrative Support	8.2	5.7
Plant Operations	6.2	4.3
Faculty Practice Plan	63.0	43.8
Debt Service	1.0	0.7
Other Expenses and Transfers	16.9	11.7
Total Expenditures:	$144.0	100.0%

Services to Patients	Laboratory	2,737,966
	Blood Bank	234,188
	Radioisotopes Services	47,734
	X-Ray Examinations	133,444
	Operations	19,833
	Deliveries	3,358
	Electrocardiograms	73,074
	Electroencephalograms	3,311
	Social Services Interviews	299,513
	Therapy Treatments (Physical, Occupational, Recreational)	258,554
	Transfusions	33,339
	Pharmacy Prescriptions	1,256,212
	Record Room-New Case Records	55,290
	Average Number of Full-Time Employees	5,878.9
Distribution of Beds	Private	
	Baker-Medicine	78
	Baker-Surgery	39
	Obstetrics and Gynecology	29
	Pediatrics	5
	Total Private	151
	Semi-Private	
	Medical/Surgical	485
	Two-Bed Baker-Medicine	57
	Two-Bed Baker-Surgery	31
	Urology	61
	Obstetrics and Gynecology	96
	Pediatrics	107
	Total Semi-Private	837
	Sub-Total Manhattan Division	988
	Newborn Bassinets	44
	Payne Whitney Clinic	108
	Total Manhattan Division	1,140
	The Westchester Division	322
	Grand Total	1,462
Patient Care	Patients Admitted Manhattan Division	39,636
	Newborn	2,889
	Payne Whitney Psychiatric Clinic	1,058
	The Westchester Division	1,226
	Total	44,809
	Patient Days, All Divisions Including Newborn	469,625
	Visits to Day Hospital	10,919
	Visits to Outpatient Clinics	180,151
	Visits to Emergency Pavilion	47,223

Educational Program

Medical Students	404
Graduate Students	116
M.D.-Ph.D. Students *(medical and graduate enrollments)*	51
Degrees Conferred *(1984-85 academic year)*	133
M.D.	110
Ph.D.	20
M.S.	3
Faculty *(including all affiliates — 1984-85 academic year)*	2,580
Full-Time	1,052
Part-Time	104
Voluntary	1,424
House Staff *(NYH-CMC only)*	466
Health-Related Students:	
Dental Hygienists	2
Dietetic Interns	18
Medical Social Workers	6
Surgical Assistants	31
Samuel J. Wood Library *(1984-85 academic year)*	
Users	379,084
Journals (titles)	2,066
Total Volumes	131,890
New Books Received	2,796

Profile of Entering Medical Students September 1985 (101 admitted out of total applicant pool of 5,424)

Men	63
Women	38
Minorities	17
New York State Residents	51
College Majors	Science (73); Non-Science (28)
Mean Grade Point Average	3.5
Average Age	23
Age Range	20-35

Universities with Three or More Graduates Admitted:

Cornell University	20	Harvard University	5
Yale University	11	Stanford University	5
Brown University	6	Columbia University	4
Princeton University	5	Univ. of Pennsylvania	3

Research
(July 1, 1984—June 30, 1985)

Federally Sponsored Research—Total Funding	$31,291,717
Privately Sponsored Research—Total Funding	$11,344,911
Research Projects Funded—New and Renewals	335
Research Publications	506

We extend our deepest thanks to the many loyal supporters of the New York Hospital-Cornell Medical Center. If space permitted, we would wish to list each one of these contributors. The following list includes those who gave $500 or more during the year. We are especially grateful to these friends.

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In 19f2, the wives of three New York Hospital governors formed a committee to assist and support the hospital's social service department in caring for needy patients. fn subsequent decades, this Social Service Committee also established a patient library and a hospital volunteer department — which later became independent entities — as well as a gift shop and thrift shop. Recognizing in 1958 that its activities had expanded beyond its social service origins, the committee reconstituted itself as the Women's Auxiliary of the Society of the New York Hospital. More recently, it dropped its gender identification and became simply the "auxiliary."

Today, with over 100 members, the auxiliary carries on its 74-year tradition of support for the hospital. Its benefactions fast year exceeded $200,000, including donations to the department of obstetrics and gynecology by the auxiliary's Lying-In Committee. Income is raised from contributions, membership dues, the auxiliary gift shop (located in the hospitaf lobby), T.V. rentals, and the auxiliary thrift shop (located at 439 East 71st Street). A *Biloxi Blues* theater benefit held in May netted $f8,500.

Through the purchases of its art committee, the auxiliary seeks to brighten the hospital's hallways, offices, and patient areas. Last year the art committee was particularly active in decorating the newly completed C.V. Starr Pavilion.

The auxiliary also funds the publication of a quarterly newsletter that appears in the newspaper *Our Town*; supports the diversional crafts program of the hospital's department of social work; and contributes to Volunteer Services for the Elderly of Yorkville, a multifaceted program of community service initiated in 1975 by the auxiliaries of the New York Hospital and Lenox Hill Hospital. Plans are currently being made for a benefit in f986.

The 1980's are bringing important changes to hospital volunteerism. As health care becomes more complex and cost-effective at the same time, volunteers are being asked to take on such responsible and challenging roles as assisting sociaf workers with discharge planning or working with patient representatives as volunteer patient advocates. Volunteers will soon be working with AIDS patients and their families. With these new roles comes the obligation to provide the training and education required of them.

During 1985, Louise Floeckher retired after f0 years as director of volunteers. In June Camille Tumolo became the department director and Roberta Smollen the assistant director. All told, 448 volunteers contributed almost 58,000 hours in approximately 45 departments. This represents an increase of almost 8,000 hours over the excellent record of the previous year.

Awards for service through 1985 are as follows:

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The New York Hospital-Cornell Medical Center represents an affiliation of the New York Hospital and Cornell University Medical College. Physicians at the medical center have appointments in both institutions.

Chiefs of service at the New York Hospital, with the exception of the physiatrist-in-chief, serve as chairmen of corresponding clinical departments of Cornell University Medical College. Physicians at the hospital have faculty appointments in the medical college. For the sake of simplicity, however, the center's clinical faculty are listed here only by their hospital titles.

In addition to the clinical departments, the center also has six basic-science departments. Since the work of these departments consists almost entirely of teaching and research, many basic-science faculty do not have hospital appointments. They are, therefore, listed here by academic title.

The medical center has affiliations with a number of institutions, including the Hospital for Special Surgery, the Burke Rehabilitation Center, Memorial Sloan-Kettering Cancer Center, North Shore University Hospital, Catholic Medical Center of Brooklyn and Queens, St. Barnabas Hospital, the Will Rogers Institute, and LaGuardia Hospital. Because of space limitations, professional staff at these institutions who do not have New York Hospital appointments are not listed in the following pages.

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Michael H. Stone, M.D.
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Max Spital, M.D.
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Phillip E. Romero, M.D.
William S. Rosenfeld, M.D.
Marie G. Rudden, M.D.
Mark J. Russ, M.D.
F. David Russek, M.D.
Eslee Samberg, M.D.
Michael B. Saul, D.M.D.
David H. Sawyer, M.D.
Ann W. Schongalla, M.D.
Ludovit Sevcik, M.D.
Mary Sickles, M.D.
Howard B. Simon, M.D.
Shubha Sinha, M.D.
Ladd Spiegel, M.D.
Mark A. Spiegel, M.D.
Timothy B. Sullivan, M.D.
Joan Tolchin, M.D.
Paul V. Trad Aboumrad, M.D.
Simon M. Trutt, M.D.
Kevin N. Turnquist, M.D.
Lawrence C. Turtil, M.D.
Traer Van Allen, M.D.
Douglas J. Van der Heide, M.D.
Mary G. Versfelt, M.D.
Barraud J. Watson, M.D.
Peter Weiden, M.D.
David J. Weiser, M.D.
Richard W. Weiss, M.D.
Frank E. Yeomans, M.D.
Jonathan I. Zach, M.D.
M. Robert Zimiles, M.D.

Professional-Associate Staff

Attending Psychologists
Arthur C. Carr, Ph.D.
John F. Clarkin, Ph.D.
Herbert Fensterheim, Ph.D.
Marvin R. Goldfried, Ph.D.
Howard F. Hunt, Ph.D.
Walter Kass, Ph.D.
Lee Salk, Ph.D.
Roy Schafer, Ph.D.

Associate Attending Psychologists
Gordon G. Ball, Ph.D.
Michael Beldoch, Ph.D.
M. David Clayson, Ph.D.
Abraham I. Cohen, Ph.D.
Herbert H. Krauss, Ph.D.
Jay S. Kwawer, Ph.D.
Bernard Landis, Ph.D.
Ruth F. Lax, Ph.D.
Armand W. Loranger, Ph.D.
Steven Mattis, Ph.D.
Melvin Muroff, Ph.D.
Michel Radomisli, Ph.D.
John M. Ross, Ph.D.
Fred Schwartz, Ph.D.
Blanche L. Serwer, Ph.D.
Muriel C. Winestine, Ph.D.
Muriel Zimmerman, Ph.D.

Assistant Attending Psychologists
Anna M. Antonovsky, Ph.D.
Gerald Berenson, Ph.D.
June E. Blum, Ph.D.
Thomas B. Boland, Ph.D.
Gilbert J. Botvin, Ph.D.
Susan Bram, Ph.D.
Betty Buchsbaum, Ph.D.
Monica Carsky, Ph.D.
Audrey J. Clarkin, Ph.D.
Jonas Cohler, Ph.D.
Barbara Fibel, Ph.D.
Jerome L. Fine, Ph.D.
Howard I. Glazer, Ph.D.
James E. Gorney, Ph.D.
Gretchen L. Haas, Ph.D.
Stephen W. Hurt, Ph.D.
Paul Hymowitz, Ph.D.
Diane A. Koch, Ph.D.
Zoe L. Lazar, Ed.D.
Alexander H. Levi, Ph.D.
Mary Libbey, Ph.D.
David A. Lord, Ph.D.
I. Barry Lorinstein, Ph.D.
Edna C. Ortof, Ph.D.
Michael A. Perelman, Ph.D.
Deborah A. Perlick, Ph.D.
Stephen Reich, Ph.D.
James C. Rembar, Ph.D.
Ruth C. Resch, Ph.D.
Phillida Brown Rosnick, Ph.D.
Gail Ross, Ph.D.
Michael G. Rothenberg, Ph.D.
Eleanor H. Rutstein, Ph.D.
Sylvia Saltzstein, Ph.D.
Peter J. Schlachet, Ph.D.
Margaret E. Snow, Ph.D.
Roger J. Sowala, Ph.D.
John A. Sweeney, Ph.D.
Lyle Tucker, Ph.D.
Alan S. Weiner, Ph.D.
Jonathan H. Weiss, Ph.D.
Jutta V. Weiss, Ph.D.

Professional Associates (Psychology)
Kenneth Barish, Ph.D.
Jane Bloomgarden, Ph.D.
David F. Cella, Ph.D.
Martin V. Cohen, Ph.D.
Roni O. Cohen, Ph.D.
Anne K. Criticos, Ph.D.
Melvin W. Crosby, Ph.D.
Peter Deri, Ph.D.
David J. Eger, Ph.D.
Katie Eisenstadt, Ph.D.
Carolyn Feigelson, Ph.D.
Mary M. Fitzpatrick, Ph.D.
Barbara L. Flye, Ph.D.
William L. Golden, Ph.D.
George Greenberg, Ph.D.
Edward R. Greenblatt, Ph.D.
James W. Hull, Ph.D.
Paula M. Ippolito, Ph.D.
Paul B. Jacobsen, Ph.D.
Stephen C. Josephson, Ph.D.
Sharon Kofman, Ph.D.
Robert S. Kruger, Ph.D.
Jerry Lanoil, Ph.D.
Anna C. Lee, Ph.D.
Mary A. Luallen, Ph.D.
Fran Luckom-Nurnberg, Ph.D.
Barbara J. Mason, Ph.D.
Sharon G. Nathan, Ph.D.
Robert S. Schachter, Ed.D.
Martin N. Seif, Ph.D.
Eric D. Shaw, Ph.D.
Michael H. Tamaroff, Ph.D.
Susan Tross, Ph.D.
Susan Wagner, Ph.D.

Professional Associates (Psychiatry)
Elaine Kleinbart, M.S.W.
Edythe H. Mencher, M.S.W.
Verena Michels, M.S.W.
Arlene Novick, M.S.W.
Saul D. Raw, M.S.W.
Estelle T. Rosen, M.S.W.
Doris M. Sisley, M.S.W.
Phyllis Urman-Klein, Ph.D.

Graduate Staff — Payne Whitney Psychiatric Clinic

Clinical Fellow
Robert P. Sbriglio, M.D.

Psychiatrist
Renee Welner, M.D.

Assistant Psychiatrists (Child Psychiatry)
Jane Asch, M.D.
Pamela A. Felder, M.D.
Elena G. Lister, M.D.
Donna Moreau, M.D.
Girard E. Robinson, M.D.
Deborah M. Weisbrot, M.D.

Assistant Psychiatrists
Jess Amchin, M.D.
Julie Balaban, M.D.
Mace Beckson, M.D.
Robin Bell, M.D.
Fredric N. Busch, M.D.
Roger Cambor, M.D.
Michael D. De Meo, M.D.
Lisa B. Dixon, M.D.
Susan L. Eder, M.D.
Douglas S. Feltman, M.D.
Deborah Fried, M.D.
Scott J. Goldsmith, M.D.
Jeffrey K. Halpern, M.D.
Julie Hatterer, M.D.
Lynne Hoffman, M.D.
Lynne R. Jacobs, M.D.
Robert Klitzman, M.D.
Jonathan Koblenzer, M.D.
Thomas A.M. Kramer, M.D.
Nathan Kravis, M.D.
Frances Rudnick Levin, M.D.
Julie Low, M.D.
Judith Lusic, M.D.
John C. Mahler Jr., M.D.
John C. Markowitz, M.D.
Rocco F. Marotta, M.D.
Peter M. Marzuk, M.D.
Donald Mender, M.D.
Barbara Milrod, M.D.
Maria A. Oquendo, M.D.
Edward M. Paul, M.D.
Dionne R. Powell, M.D.
Jean Roiphe, M.D.
Lynn Schackman, M.D.
Ann P. Sellew, M.D.
Lisa Sinsheimer, M.D.
Stephen L. Snyder, M.D.
Bruce Sutton, M.D.
Carol J. Weiss, M.D.
Philip J. Wilner, M.D.

Graduate Staff — Westchester Division

Psychiatrist
Steven E. Gelda, M.D.

Assistant Psychiatrists (Child Psychiatry)
Katherine A. Belton, M.D.
Robert Catenaccio, M.D.
Alison Orr-Andrawes, M.D.
Peter H. Robbins, M.D.
Richard W. Saxton, M.D.

Assistant Psychiatrists
Susan G. Abraham, M.D.
Tedd H. Ackerman, M.D.
Michael L. Balogh, M.D.
Bryan V. Boffi, M.D.
Stephen E. Buie, M.D.
Mitchell Butin, M.D.
Deborah A. Deliyannides, M.D.
Taryn Fishman, M.D.
Marianne Goldsmith, M.D.
Kim A. Gutner, M.D.
Robin M. Hamilton, M.D.
Roger M. Harris, M.D.
Mark A. Heitner, M.D.
Judith Herzig, M.D.
Alex E. Horwitz, M.D.
Gabriel Kaplan, M.D.
Lawrence Kelmenson, M.D.
Felix Kleyman, M.D.
Thomas E. Knox, M.D.
Dario La Rocca, M.D.
Gregory T. Lombardo, M.D.
Ronald N. Marcus, M.D.
Gregory Q. Marsella, M.D.
Richard H. McCarthy, M.D.
Robert J. McClintock, M.D.
Danielle Murstein, M.D.
Bradford B. Perry, M.D.

Steven J. Romano, M.D.
Adam M. Roth, M.D.
Margot S. Rubinstein, M.D.
Mark A. Scher, M.D.
Ellen K. Schlefer, M.D.
Mark E. Servis, M.D.
Walter W. Strauser, M.D.
Jeffrey E. Taxman, M.D.
Heidi Van Bellingham, M.D.
Carol W. Weinstein, M.D.
L. Adele West, M.D.

Radiology Medical Staff

Radiologist-in-Chief
Joseph P. Whalen, M.D.
Attending Radiologists
David V. Becker, M.D.
Yahya M. Berkmen, M.D.
Florence C. Chu, M.D.
Michael D.F. Deck, M.B., B.S.
John A. Evans, M.D.
Robert H. Freiberger, M.D.
Jae Ho Kim, M.D.
Lourdes Nisce, M.D.
Nathan Poker, M.D.
Thomas A. Sos, M.D.
R. Caird Watson, M.D.
Patricia Winchester, M.D.
Associate Attending Radiologists
Mostafa A. Batata, M.D.
Paula W. Brill, M.D.
F. Mitchell Cummins, M.D.
Bernard Ghelman, M.D.
Amy Beth Goldman, M.D.
Antonio F. Govoni, M.D.
James R. Hurley, M.D.
Herbert G. Kantor, M.D.
Elias Kazam, M.D.
Helene Pavlov, M.D.
Morton Schneider, M.D.
George Stassa, M.D.
Hind S. Teixidor, M.D.
Robert D. Zimmerman, M.D.
Assistant Attending Radiologists
Gerald F. Abbott, M.D.
Yong H. Auh, M.D.
Richard D. Becker, M.D.
Sheila D. Davis, M.D.
Andrew W. Haraway Jr., M.D.
Linda A. Heier, M.D.
Claudia I. Henschke, M.D.
James C. Hirschy, M.D.
Seymour Hopfan, M.D.
Richard J. Katz, M.D.
George Krol, M.D.
Miriam Levy-Ravetch, M.D.
Charlynn C. Maniatis, M.D.
John A. Markisz, M.D.
Beryl McCormick, M.D.
Harvey Morrison, M.D.
Dattatreyudu Nori, M.D.
Grigory Rozenblit, M.D.
William A. Rubenstein, M.D.
Leslie A. Saint-Louis, M.D.
Salil D. Sarkar, M.D.
Robert Schneider, M.D.
Brenda Shank, M.D.
Scott J. Sherman, M.D.
Marcel F. Srur, M.D.
Bhadrasain Vikram, M.D.
Kenneth Zirinsky, M.D.
Clinical Affiliate
Martin Barandes, M.D.

Professional-Associate Staff

Attending Physicist (Nuclear Medicine)
Rodney E. Bigler, Ph.D.
Assisting Attending Physicist (Nuclear Medicine)
Pat Zanzonico, Ph.D.
Professional Associate (Physics)*
Stephen Balter, Ph.D.

Graduate Staff

Clinical Fellows
James L. Amster, M.D.
Georgia A. Cataldi, M.D.
Mark R. Goldberg, M.D.
David P.C. Liu, M.D.
Calvin D. Neithamer Jr., M.D.
Abraham Port, M.D.
Daron Z. Regunberg, M.D.
Elliott H. Sumers, M.D.
Ethan A. Tarasov, M.D.
Assistant Radiologists (Nuclear Medicine)
Diane Connors, M.D.
David F. Yankelevitz, M.D.
Assistant Radiologists
Thomas P. Boyle, M.D.
Howard G. Butler, M.D.
Samuel Choi, M.D.
Patricia E. Cole, M.D.
Robert R. Ford, M.D.
Alison Bender Haimes, M.D.
Craig J. Hart, M.D.
Santiago J. Hernandez, M.D.
Anand S. Jagannath, M.D.
Caren Jahre, M.D.
Bernadette Keefe, M.D.
Anna Kelly, M.D.
Risa H. Kent, M.D.
Susan C. Krysiewicz, M.D.
Steven V. Lossef, M.D.
Kenneth P. Morrison, M.D.
Bette J. Nyhlen, M.D.
Richard A. Sarner, M.D.
Donna M. Scuderi, M.D.
Craig H. Sherman, M.D.
John Sierra, M.D.
William G. Stanton, M.D.
David A. Wojtasek, M.D.

Rehabilitation Medicine Medical Staff

Physiatrist-in-Chief
Willibald Nagler, M.D.
Associate Attending Physiatrists
Hermina Z. Benjamin, M.D.
Ronald F. Green, M.D.
Emmanuel Rudd, M.D.
Assistant Attending Physiatrists
Joanne Tejera, M.D.
Irene von Estorff, M.D.
Clinical Affiliate
Irina Barkan, M.D.
Peter H. Stern, M.D.

Professional-Associate Staff

Professional Associate (Podiatry)
Larry B. Price, D.P.M.
Professional Associates (Rehabilitation Medicine)
Michael E. Groher, Ph.D.
H. Richard Lehneis, Ph.D.

Graduate Staff

Assistant Physiatrists
Vera Bingham, M.D.
Vishnu Deo-Narine, M.D.
Denise M. Enari, M.D.
Sheryl R. Levin, M.D.
Gale Pugliese, M.D.
Nelza Rivera-Competiello, M.D.
Joseph Sciortino, M.D.
Gloria M. Sosa, M.D.

Surgery

Surgeon-in-Chief
G. Tom Shires, M.D.

General Surgery Medical Staff

Attending Surgeons
William A. Barnes, M.D.
Murray F. Brennan, M.D.
Jerome J. DeCosse, M.D.
Peter Dineen, M.D.
William R. Grafe Jr., M.D.
Malcolm O. Perry, M.D.*
S. Frank Redo, M.D.**
Albert L. Rubin, M.D.
Kurt H. Stenzel, M.D.
Bjorn Thorbjarnarson, M.D.
George E. Wantz, M.D.
John C. Whitsell II, M.D.
Associate Attending Surgeons
Jhoong S. Cheigh, M.D.
Robert L. Clarke, M.D.
George N. Cornell, M.D.
Armand F. Cortese, M.D.
John Mihran Davis, M.D.
Cleon W. Goodwin, M.D.
Peter M. Guida, M.D.
Vincent F. Marzulli, M.D.
Kevin P. Morrissey, M.D.
Walter F. Pizzi, M.D.
Robert R. Riggio, M.D.
Stuart D. Saal, M.D.
Michael F. Silane, M.D.
Paul A. Skudder, M.D.
William T. Stubenbord, M.D.
John F. Sullivan, M.D.
Manikkam Suthanthiran, M.D.
Luis Tapia, M.D.
Roger W. Yurt, M.D.
Assistant Attending Surgeons
Anthony C. Antonacci, M.D.
John M. Aronian III, M.D.
Philip S. Barie, M.D.
William T. Curry, M.D.
Kenyon B. Field, M.D.
Jerome Finkelstein, M.D.
James P. Gaston, M.D.
John G. Hansen, M.D.
Karen M. Kostroff, M.D.
Stephen F. Lowry, M.D.
Michael R. Madden, M.D.
Carmine J. Mauro, M.D.
Eugene J. Nowak, M.D.
David S. Speer, M.D.
Harry Statman, M.D.
John C.L. Wang, M.D.
Clinical Affiliates
David A. Mayer, M.D.
Earl A. O'Neill, M.D.

Attending Surgeon-in-Charge — Vascular Surgery Division

**Attending Surgeon-in-Charge — Pediatric Surgery Division*

Professional-Associate Staff

Surgeons' Assistants
Patrick J. Brennan
Diana L. D'Amelio
Daryl Davidson
Jill M. Downey
Bettye L. Epstein
Donna M. Hamilton
David Johnson
John Lee
Mary L. Lombardi
Geoffrey O'Sullivan
Andrea J. Portenoy
Howard F. Rose
Randy Tymon

Graduate Staff

Clinical Fellows
James D. Albert, M.D.
Steven D. Eisenstadt, M.D.
Gary A. Fantini, M.D.
Brian C. Organ, M.D.
Kevin J. Tracey, M.D.
Surgeons
Gabriel S. Aldea, M.D.
William A. Anderson, M.D.
James L. Clarke, M.D.
David E. Eisenbud, M.D.
H. Stephen Hudgens, M.D.
Dougald C. MacGillivray, M.D.
Michael A. Marano, M.D.
Albert J. Pfister, M.D.
Barry J. Zadeh, M.D.
Assistant Surgeons
James P. Anthony, M.D.
Allyson A. Askew, M.D.
Annabel E.M. Barber, M.D.
Edward M. Beck, M.D.
Anne Marie Billingsley, M.D.
Mark K. Bowen, M.D.
Mary Sue Brady, M.D.
Kenneth J. Bregg, M.D.
Robert L. Buly, M.D.
Anthony C. Cahan, M.D.
David Calcagno, M.D.
W. Michael Canning, M.D.
Eli R. Capouya, M.D.
Daniel G. Ciaburri, M.D.
Lawrence H. Durban, M.D.
John M. Emery III, M.D.
Yuman Fong, M.D.
Henri R. Ford, M.D.
Neil B. Friedman, M.D.
Andrew I. Glantz, M.D.
Mark S. Gordon, M.D.
Heidi D. Gorsuch, M.D.
Robert T. Grant, M.D.
Paul H. Halebian, M.D.
David G. Hesse, M.D.

Allen B. Jetmore, M.D.
William G. Jones II, M.D.
Marisa Lawrence, M.D.
William D. Lazenby Jr., M.D.
I. Michael Leitman, M.D.
Steven K. Macheers, M.D.
Stephen M. Martin, M.D.
William W. Mayo-Smith, M.D.
M. Victor McLaughlin Jr., M.D.
Eric J. Miller, M.D.
Joseph P. Minei, M.D.
Steven L. Parker, M.D.
Douglas E. Paull, M.D.
Louis G. Prevosti, M.D.
Alan I. Reed, M.D.
Neal D. Shore, M.D.
Robert E. Steckler, M.D.
Kenneth K. Tanabe, M.D.
James R. Taylor Jr., M.D.
Joseph R. Vitolo, M.D.
Eric B. Whitacre, M.D.

Cardiothoracic Surgery Medical Staff

Attending Surgeon-in-Charge
O. Wayne Isom, M.D.
Attending Surgeons
Cranston W. Holman, M.D.
George R. Holswade, M.D.
Associate Attending Surgeons
John C. McCabe, M.D.
Arthur J. Okinaka, M.D.
Valavanur A. Subramanian, M.D.
Assistant Attending Surgeons
Michael E. Burt, M.D.
Jeffrey P. Gold, M.D.
Karl H. Krieger, M.D.

Graduate Staff

Thoracic Surgeons
Richard C. Richter, M.D.
Newell B. Robinson, M.D.
Assistant Thoracic Surgeons
Steven M. Keller, M.D.
Stephen J. Lahey, M.D.

Dental and Oral Surgery Medical Staff

Attending Oral Surgeon-in-Charge
Stanley J. Behrman, D.M.D.
Attending Dentist
John J. Putnam, D.D.S.
Associate Attending Dentist (Endodontist)
Nelson I. Mendell, D.M.D.
Associate Attending Dentist (Myo-Functional Therapy)
Harvey Miller, D.D.S.
Associate Attending Dentist (Orthodontist)
Joseph D. Davis, D.D.S.
Associate Attending Dentists (Periodontists)
Seymour M. Koteen, D.D.S.
Joseph E. Rowan, D.D.S.
Associate Attending Dentists (Prosthodontists)
Gerald M. Galvin, D.D.S.
Jason C. Lee, D.D.S.
Ivin B. Prince, D.D.S.
Associate Attending Dentist (Roentgenologist)
J. Kenneth Schmidt, D.M.D.
Associate Attending Dentist (TMJ)
Leonard E. Quitt, D.D.S.
Associate Attending Dentists
Lawrence A. Behrman, D.D.S.
Louis Marino, D.D.S.
Ernest R. Piccaro, D.D.S.
Assistant Attending Oral Surgeons
Steven M. Baum, D.D.S.
David A. Behrman, D.M.D.
Thomas M. Darrigan, D.D.S.
Arthur C. Elias, D.M.D.
Michael R. Glogoff, D.M.D.
Jerry L. Halpern, D.D.S.
Andrew J. Hauser, D.D.S.
Claudia B. Kaplan, D.D.S.
Frederick M. Lifshey, D.D.S.
Peter H. Pruden, D.D.S.
Steven J. Tunick, D.M.D.
Assistant Attending Dentists (Endodontists)
Joseph M. Leavitt, D.D.S.
Sebastian J. Lentini, D.D.S.
Assistant Attending Dentist (Orthodontist)
Mark S. Lemchen, D.M.D.
Assistant Attending Dentists (Pedodontists)
Louis M. Cooper, D.D.S.
Mark S. Hochberg, D.D.S.
David J. Levine, D.D.S.
Jack L. Mitchell, D.D.S.
Assistant Attending Dentists (Periodontists)
Barry M. Libin, D.D.S.
Philip D. Pack, D.M.D.
George W. Sferra Jr., D.D.S.
Assistant Attending Dentists
Salvatore J. Durante, D.D.S.
Richard F. Giannandrea, D.D.S.
Robert Karsten, D.D.S.
Guy N. Minoli, D.D.S..
Jonathan Prince, D.D.S.
Steven Saltzman, D.D.S.
Robert M. Sorin, D.M.D.
Clinical Affiliates (Orthodontists)
Robert M. Cole, D.D.S.
Gregory W. Sanford, D.M.D.

Graduate Staff

Clinical Fellow (Dental and Oral Surgery)
Brendan M. Cooney, D.D.S.
Oral Surgeon
Gary Ruth, D.D.S.
Assistant Oral Surgeon
James A.H. Tauberg, D.M.D.
Intern in Oral Surgery
Robert D. Carpenter, D.M.D.
Interns (General Practice)
Frederick M. Joubert, D.D.S.
Michael Mass, D.D.S.
George P. Tavolilla, D.D.S.
Alexandra E. S. Thomson, D.M.D.

Neurosurgery Medical Staff

Attending Surgeon-in-Charge
Russel H. Patterson Jr., M.D.
Attending Surgeon
Richard A.R. Fraser, M.D.
Associate Attending Surgeons
Joseph H. Galicich Jr., M.D.
Francis W. Gamache Jr., M.D.
Michael H. Lavyne, M.D.

Graduate Staff

Surgeon
Robert B. Snow, M.D.
Assistant Surgeons
David W. Andrews, M.D.
Jamshid B.G. Ghajar, M.D.
Mazen Khayata, M.D.

Orthopedics Medical Staff

Surgeon-in-Chief, The Hospital for Special Surgery
Philip D. Wilson Jr., M.D.
Attending Surgeons
John H. Doherty, M.D.
Allan E. Inglis, M.D.
John N. Insall, M.D.
Bernard Jacobs, M.D.
Joseph M. Lane, M.D.
David B. Levine, M.D.
Chitranjan S. Ranawat, M.D.
Leon Root, M.D.
Eduardo A. Salvati, M.D.
L. Ramsay Straub, M.D.
Associate Attending Surgeons
Walter H.O. Bohne, M.D.
John P. Lyden, M.D.*
Peter J. Marchisello, M.D.
Ralph C. Marcove, M.D.
Thomas P. Sculco, M.D.
Russell F. Warren, M.D.
Assistant Attending Surgeons
Samuel Avnet, M.D.
John H. Healey, M.D.
Norman A. Johanson, M.D.
Richard McCormack Jr., M.D.
Jeanne R. Pamilla, M.D.
Paul M. Pellicci, M.D.
Konstantin P. Velis, M.D.
Thomas L. Wickiewicz, M.D.
Russell E. Windsor, M.D.

Graduate Staff

Surgeons
Howard J. Agins, M.D.
Abraham T. Appleton, M.D.
Bernard R. Bach Jr., M.D.
Oheneba Boachie-Adjei, M.D.
Steven N. Brourman, M.D.
Franco P. Cerabona, M.D.
Charles Cornell, M.D.
Richard L. Delaney, M.D.
William F. Donaldson III, M.D.
James A. Goulet, M.D.
Ronald L. Mann, M.D.
Thomas H. McCoy, M.D.
Stephen J. O'Brien, M.D.
Raymond H. Pierson III, M.D.
Stewart L. Shanfield, M.D.
Anthony S. Unger, M.D.
Kelly Vince, M.D.
Joanne R. Werntz, M.D.
Assistant Surgeons
David W Altchek, M.D.
Walter B. Beaver, M.D.
Joseph G. Bouscaren, M.D.
Roberta Brockman, M.D.
Daniel D. Buss, M.D.
Frank P. Cammisa Jr., M.D.
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Pascal J. Imperato, M.D.
Sidney S. Lee, M.D.
Valerie Miké, Ph.D.
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Research Associate
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Martha Hickerson, M.S.W.
Susan Nitto, M.S.N.
Andrea Scheidt, M.P.H.

Deaths

We note with great regret the passing during 1985 of the following members of the center's professional staff and faculty:
William A. Briscoe, M.D.
Attending Physician
Matthew M. Cestari, M.D.
Assistant Psychiatrist
Aaron Feder, M.D.
Attending Physician
John E. Franklin, M.D.
Honorary Staff (Pediatrics)
Edward I. Goldsmith, M.D.
Attending Surgeon
Arthur V. Greeley, M.D.
Attending Obstetrician and Gynecologist
Jeffrey Holtzman, M.D.
Assistant Professor of Psychology in Neurology
John F. Seybolt, M.D.
Honorary Staff (Pathology)
Paul Sherlock, M.D.
Attending Physician
Stanley S. Zipser, M.D.
Associate Attending Pediatrician

A Gift to the New York Hospital-Cornell Medical Center

For the Guidance of Your Attorney

Gifts and bequests are an important source of funding for the New York Hospital-Cornell Medical Center. A gift to the New York Hospital-Cornell Medical Center gives aid to the ill and the distressed, supports programs that educate doctors for the future, and makes possible research to stamp out disease, helping people today and generations yet unborn.

The medical center encourages gifts without restriction so as to permit greater facility in planning and administering its extensive and complex programs of patient care, medical education and research.

If a bequest is made to the medical center, the language may be, "I give and bequeath to The New York Hospital-Cornell Medical Center Fund Inc. the sum of $ _____ ."

Gifts may be made in a number of ways, such as by money (check or cash), by securities, by testamentary devise (land) or by intervivos or testamentary trust.

Because the institutions constituting the New York Hospital-Cornell Medical Center are voluntary, nonprofit institutions (the New York Hospital and Cornell University Medical College) contributing to the public welfare, gifts to the medical center by individuals or corporations are exempt from income, gift and inheritance taxes to the extent and in the manner provided by federal and state laws.

An estate affairs program has been established at the medical center. The program complements its traditional sources of philanthropic support by offering deferred-giving opportunities through charitable remainder trusts that can benefit donors as well as the medical center.

The Society of the New York Hospital, which maintains the New York Hospital, is a corporation created by Royal Charter granted by King George III of England in 1771. The suggested terminology for an unrestricted devise or bequest to or for its benefit is: "I give, devise and bequeath to The Society of the New York Hospital Fund, Inc., a corporation created under the New York State Not-for-Profit Corporation Law and located in New York City, New York... (description of the property) to be used for the general corporate purposes of The Society of the New York Hospital as its board of directors should determine."

If a bequest is made to the medical college, the language may be: "I give and bequeath to Cornell University the sum of $ _____ for use in connection with its Medical College in New York City."

If it is desired that a gift or bequest shall be used in whole or in part for any specific purpose in connection with the hospital, medical college or medical center, such use may be specified.

Further information about making a gift to the hospital may be obtained from the Office of the Secretary, The Society of the New York Hospital, 525 East 68th Street, N.Y., N.Y. 10021 (212-472-5645). Further information about making a gift or bequest to the medical college may be obtained from the Secretary of the Cornell University Medical College, 1300 York Avenue, Room F-100, N.Y., N.Y. 10021 (212-472-8397).

Inquiries about gifts to the Medical Center Fund Inc. can be directed to either of the above or to Nancy Walker, Acting Director of Development, 525 East 68th Street, New York, New York 10021 (212-472-6704).

Annual Report Photography
Chief Photographer: Terry Hourigan
Other photographs by Ben Mancuso, Dick Nadel, Lisa Sheble, and Morris Warman

The New York Hospital—Cornell Medical Center
525 East 68th Street New York, N.Y. 10021

The New York Hospital-Cornell Medical Center

ANNUAL REPORT 1986

Reaching Out:

The Medical Center and the Community

Cover: NYH-CMC paramedics respond to a 911 emergency in Grand Central Station.

(Story on page 17.)

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Chairmen's Report

The New York Hospital–Cornell Medical Center moved ahead in 1986 in anticipation of the changes taking place in medical education, research, and patient care.

The new C.V. Starr Pavilion was completed and is fully operative, enabling us to accommodate in a most modern setting the rapidly increasing number of patients availing themselves of ambulatory diagnosis and treatment. The radiology component of this outstanding new facility is second to none.

Initial occupancy of the handsome new Helmsley Medical Tower occurred in 1986. This 36-storey building, connected by tunnel to the hospital, provides attractive residential space not otherwise available in the area for nurses and other staff. Comfortable quarters have been designated for ambulatory patients requiring overnight stay and for visiting families of patients. Other space is devoted to treatment and auxiliary facilities that need not be located in the hospital itself.

Construction was begun last year on the William and Mildred Lasdon Biomedical Research Center. Located between 68th and 69th Streets in what formerly was a courtyard of the medical college, this new structure will house ultramodern laboratory and library facilities to support the ambitious program of this center in biomedical research.

These substantial projects notwithstanding, much remains to be done to modernize the physical plant of the medical center, now more than a half century old. Plans for this critical reconstruction have been formulated and are being presented to appropriate public agencies for review and approval.

This annual report focuses on a commitment that goes to the heart of the medical center's purpose, that of community service. The scope and reach of this service continue to grow. The center's affiliations now exceed 50, and range from suburban institutions to some located in the most underserved areas of the inner city. In 1986 the hospital entered into an innovative agreement with the Health Insurance Plan of Greater New York, in which the hospital provides care for complex or severe conditions that may afflict H.I.P's more than one million members, most of whom are municipal employees. The hospital continues to enroll new members in its corporate care program, which now covers about 100,000 employees in more than 100 companies.

Our commitment to the community begins with the highest quality of care for our patients, but, as this report makes clear, it goes well beyond that. At a time when academic medical centers are being looked to as never before to deal with the health problems of the community at large, this commitment takes on a particular importance and provides us with challenges and opportunities that are quite new.

At the same time that the community seeks our help, it provides us with support that is critical to our future. We are grateful that our ambitious capital campaign, led by Eleanor Elliott and Jansen Noyes, is coming to a successful conclusion. The magnificent gift in 1986 of $33 million by Mr. and Mrs. Harry B. Helmsley moved us well along toward the $300 million goal.

We record with regret that Francis Kernan, a life governor and former president of the hospital, died on October 4. During 19 years as a governor, he played a vital role in the affairs of the hospital, and, as a life governor, he remained a source of valued counsel. His contributions will long be remembered.

It is a credit to the more than 8,000 people who work at this medical center that the dislocations associated with change and modernization have in no way diminished the center's ability to carry out its missions. We thank them for their superb efforts during the past year.

Robert S. Hatfield,
Chairman of the Joint Board, 1987

Frank H.T. Rhodes
Chairman of the Joint Board, 1986

With the superstructure of the Lasdon Biomedical Research Center rising behind them are, left to right, Dr. Thomas Meikle, dean of Cornell University Medical College; Dr. David Thompson, director of the New York Hospital; Cornell University president Frank Rhodes, chairman of the medical center's joint board for 1986; and New York Hospital president Robert Hatfield, chairman of the joint board for 1987.

The Medical Center and the Community

As a leading academic medical center, the New York Hospital–Cornell Medical Center has many constituencies. The center's eminence in clinical medicine draws patients here from throughout the world, and its scientists belong to a fellowship of scholars that is worldwide. At the same time, this is equally a community institution, a principal provider for people who live nearby as well as for the larger community of New York City and the metropolitan area.

Never has the interdependency of the medical center and its local constituencies been clearer than it is today. With major requirements for building and renewal, the center needs the support and understanding of the community, which, for its part, increasingly looks to this center for help with a great variety of needs. The importance of the hospital's community advisory board, consisting of 25 community leaders who meet five times a year, reflects this growing interdependency, as does the establishment of the center's department of community relations.

A highly visible evidence of the center's commitment is the C. V. Starr Pavilion, which, since its opening in 1985, has greatly enhanced the center's capacity to provide cost-effective, outpatient care. Last year's annual report discussed the significance of this new building for the community. This year's report, taking for its theme *The Medical Center and the Community*, deals with an impressive group of programs that further illustrate the strength of this relationship. Most of these programs take place, at least in part, outside the medical center.

The following pages deal with three broad aspects of the theme.

The first section, *Saving Lives Is Just the Beginning*, deals with the center's long-term commitment to many of its patients—a commitment illustrated here with respect to low-birthweight infants, chronically ill children, and kidney transplant patients.

The second section illustrates the center's increasing role in *health promotion and disease prevention*, a role embracing some of society's most pressing concerns—AIDS, substance abuse, smoking, job stress, teenage pregnancy, the ravages of fire.

The third section, *Reaching Out*, describes programs that extend the center's technology and know-how into the community—through expanded ambulance and emergency service; through initiatives in medically underserved areas, like the Bedford-Stuyvesant section of Brooklyn; and through an innovative program, called Lifeline, that provides instant access for the elderly to emergency services.

In most of these programs, as in most of the center's endeavors, service, research and education go together. In addition to directly benefitting the local community, these programs yield lessons in community medicine that are widely applicable. Our commitment is both to a particular community and to the importance of community-based medicine as a bulwark of the American health-care system.

Thomas H. Meikle Jr., M.D.
Dean, Cornell University Medical College

David D. Thompson, M.D.
Director, The New York Hospital

SAVING LIVES
IS JUST
THE BEGINNING

High-Risk Infants

When Lisa was born three months prematurely, she was cared for in the NYH-CMC neonatal intensive care unit, where she was put on a respirator and monitored continuously. Two months later, when she was discharged, her parents were invited to join a special follow-up program for babies whose birthweight was less than two and a half pounds or whose breathing was interrupted at birth.

Gail Ross, a psychologist at the NYH-CMC perinatology center, administers a test to seven-year-old Raymond Harris, a participant in the center's follow-up program for high-risk infants. Divider page: Raymond takes a look at where he was seven years ago.

"The great majority of infants treated in our perinatology center require no special subsequent care," says Dr. Peter Auld, director of the center. "But, inevitably, some will develop disabilities, and we regard it as our responsibility to follow those most at risk for three years and, in some cases, even longer. Should disabilities develop, early detection and intervention can keep their effects to a minimum."

Lisa was one of about 250 infants who are invited each year to join the follow-up program, carried out by an interdisciplinary team of experts. On her first follow-up visit, three months after birth, Lisa exhibited slight tremors and some difficulty in focusing on her left side. At six months she began to show weak muscle tone and slight uncontrolled movements, and at nine months she was found to have cerebral palsy.

Since Lisa's mother worked during the day and couldn't take the child to a therapist, the perinatal team set up a regime of physical therapy at home. At one year Lisa wasn't sitting well and could move only by dragging herself by her arms and legs. The staff urged her mother to continue the therapy and not be discouraged. They designed exercises for mother and child together and added the services of a speech therapist.

When Lisa was two, a public health nurse entered her in a United Cerebral Palsy program, where she received intensive training. Dr. Gail Ross, a psychologist at the perinatology center, also continued to see her. Today enrolled in a public school, Lisa has made remarkable progress. She walks with only a slight limp, is outgoing and articulate, and is expected to do fine academically.

"From the very beginning, it was clear that, with proper help, Lisa could go a long way toward overcoming her handicap," says Dr. Ross. "Most of the children we deal with need only a little extra help and attention—but getting it early makes a lot of difference. It gives them that extra edge which enables them to function normally."

Kidney Transplant Patients

In 1963, when the first kidney transplant was performed at the New York Hospital–Cornell Medical Center, the operation was relatively new. Since that time over 1,200 transplants have been carried out by the center's kidney unit, now called the Rogosin Institute. As medical advances have lowered the rate of transplant rejection, the demand for the operation has increased, so that currently over 1,000 people in New York State are awaiting kidney transplantations. Although public acceptance of organ donation has been increasing in the United States—spurred by Congressional hearings and the efforts of the surgeon-general—the supply of donor organs still represents only about 10 to 15 percent of the cases of brain death that occur every year throughout the country.

Two years ago some staff members at the Rogosin Institute, concerned about a continuing shortage of available organs, inaugurated a kidney transplant education network here. Drawing its membership from kidney transplant recipients, the network has encouraged activities in behalf of organ donation and has become a source of support and information for the former patients. Largely through the volunteer efforts of Dr. Jhoong Cheigh and two nurses, Lillian Andrews and Sheila Moran, meetings of the network have been held four times yearly, and newsletters summarizing the meetings and providing other news of interest are regularly sent to some 150 network members.

It was in gathering information for a network meeting on fitness that Ms. Andrews learned that a national Olympics for kidney transplant recipients was to be held in Fort Worth, Texas in October 1986. She and Ms. Moran immediately set to work raising money, with the result that a team of transplant recipients traveled to Fort Worth to compete in track, tennis, swimming and other sports, and returned to New York with five gold medals and two silver medals.

What the kidney transplant education network has made clear is how worthwhile such groups can be for people who have had severe illnesses or undergone major medical procedures. Applying the principle to another serious medical condition, the NYH-CMC department of medicine last year inaugurated a support group for former heart patients. The meetings provide valuable information and support in the difficult period that follows a serious coronary event.

Ann Felter received a kidney transplant at the New York Hospital in May 1985 and won a gold medal in track a little over a year later at the U.S. Kidney Transplant Games.

Children's Blood Diseases

Until recently, babies born with thalassemia, a hereditary disorder affecting the production of red blood cells, rarely lived past adolescence. Today they commonly live well into their adult years. Victims of sickle cell disease, another inherited disorder of red blood cells, are also surviving much longer than formerly was the case. Children afflicted with hemophilia, an inherited clotting disorder, can look forward to a normal life span.

But living with the pain and stress of chronic conditions creates tremendous strains for both patients and their families. Children may require frequent transfusions and may develop a variety of secondary illnesses. They may become frightened or depressed because they don't feel well or perceive themselves as different from their peers. Parents often feel guilty and overanxious about their children's health. These circumstances may affect vital relationships outside the family—with friends or neighbors or fellow workers, with schools and public agencies.

Dr. Margaret W. Hilgartner, head of the medical center's division of pediatric hematology/oncology, emphasizes that meeting the medical needs of these children is just one aspect of the division's work. "Of equal importance is concern about the quality of life of these children and their families," she says. The largest center in the city for children's blood diseases, the division currently treats close to 600 patients with serious blood disorders and cancers. While most of the patients were either born at New York Hospital-Cornell Medical Center or referred there as youngsters, a unique feature of this pediatric service is that it continues to treat its patients into their adult lives.

The division's comprehensive-care team includes pediatricians, psychiatrists, nurses, social workers, physical therapists, and orthopedic specialists. At every stage of development the team works with the child and family to make them as self-sufficient as possible in coping with the disease. Social workers and nurses regularly visit schools to educate teachers and school boards about the special needs of these students. The division's unvarying goal: to help each patient live as full and active and normal a life as possible.

Today the AIDS virus poses a new threat to patients with chronic blood disorders, many of whom have needed frequent transfusions throughout their lives. Hemophiliacs are especially at risk: with one dose of clotting factor being the product of many blood donations, a hemophiliac may be exposed to the equivalent of 800,000 donors a year.

More than three fourths of the division's hemophiliac patients have tested positive for the AIDS virus. That only one percent have developed AIDS suggests to Dr. Hilgartner that the processing of plasma may alter the virus, but, even so, testing positive represents a serious psychological burden. The division has responded with expanded counseling and a new wave of concern for patients who live with so many stresses that it seems intolerable they should have more. Says Dr. Hilgartner, "Nowhere is there a better illustration of the adage that care *of* the patient means caring *for* the patient. And nowhere are physicians privileged to have patients more courageous than these."

Dr. Margaret Hilgartner conducts a regular periodic examination of hemophilia patient Tracy Levine. Now 20 years old and a student at Queensboro Community College, Mr. Levine has been a patient of the division of pediatric hematology/oncology since he was three.

PREVENTION

Smoking

Ten or fifteen years ago when youngsters were taught about the hazards of cigarettes—or, for that matter, of alcohol or drugs—the strategy was essentially to scare them with facts,'' says Dr. Gilbert Botvin, an associate professor in public health and psychiatry at NYH-CMC. ''The result was that 90 percent of the kids knew smoking was dangerous but that many did it anyway. Today we're trying a different approach, and the results so far are very promising, even exciting.''

As director of CUMC's Laboratory of Health Behavior Research, Dr. Botvin is a chief investigator on three major smoking-prevention studies funded by $5 million from the National Institutes of Health and involving a total of some 30,000 adolescents. Two of the grants target minority children, since recent federal statistics reveal considerably higher rates of smoking among blacks than among whites.

What distinguishes the new approach from what used to be done, Dr. Botvin explains, is that it not only teaches that smoking is harmful but seeks to help youngsters resist social pressures to smoke. In 12 class units, taught by regular classroom teachers who follow a curriculum guide developed by Dr. Botvin, a range of activities are devoted to what is called life-skills training. The basic purpose is twofold: first, to teach adolescents how to recognize and resist social influences to smoke, drink, use drugs; and, second, to teach active coping skills in an effort to increase self-esteem and independence and to reduce potential motivations for substance abuse.

Studies by Dr. Botvin's group have found life-skills training to have a profound effect on youngster's smoking behavior. In one study involving 426 junior high schoolers, it was found that, one year after the completion of life-skills training, 56 percent fewer students in the life-skills group smoked regularly than was the case in the control group. Other studies by the Cornell group have found 60 percent to 80 percent reductions in alcohol and marijuana use. Their studies have shown too that subsequent booster sessions can be effective in sustaining—or even enhancing—the effect.

A central concern of the group today is how to preserve in large-scale dissemination the care and completeness of the pilot studies. Current success rates suggest that ultimately life-skills training can prevent millions of youngsters from acquiring smoking habits.

Students at Junior High School 60 on Manhattan's Lower East Side do a relaxation exercise as part of their life-skills training. Divider page: Under the watchful eye of Dr. Gilbert Botvin, students do role-playing designed to help them resist social pressures to smoke. A piece of chalk substitutes for a cigarette.

Job Problems

A middle-management executive has been in the doldrums for the past five years, barely getting by at work when he should be moving ahead. At his wife's behest, he seeks help at the Employee Development Center, a research and service unit of NYH-CMC that contracts with corporations and unions to provide help to employees. Problems that bring workers to the EDC range from substance abuse to marital discord to gambling debts.

A confidential evaluation by the EDC reveals that the executive is in withdrawal a good part of the time from alcohol and valium: a low level of substance abuse slows him down both by its direct effects and by interfering with his sleep. After initiating counseling, the EDC refers the employee to a good outpatient program, and for two years thereafter monitors his progress, which turns out to be substantial.

Under the direction of Dr. Robert Millman, who last year became the first Saul P. Steinberg Distinguished Professor of Psychiatry and Public Health at NYH-CMC, the Employee Development Center provides services for six corporations with a total of about 2,500 employees and two unions with a total membership of close to 100,000. The three-year-old center developed out of a highly successful employee-assistance program conducted for the 15,000 employees of the medical center and neighboring institutions on York Avenue. Operating on a $500,000 annual budget, EDC is largely self-supporting, with about 30 percent of its cost being borne by a grant from New York State.

Ninety percent of the employees seen by EDC initiate the contact themselves. Of those referred by superiors—so-called "job jeopardy" cases—about 60 percent retain their jobs. Since the success of the program depends to a large extent on the quality of its referrals, a major task for EDC is to monitor the referral agencies. The center also runs sessions for supervisors to help them identify worker problems and to encourage them to help.

Substance abuse is a particular concern of EDC. "Drug and alcohol abusers have three to four times as many accidents at work as non-abusers and cause billions of dollars in losses annually," says Dr. Millman. "The recent national uproar about urine testing tells us society is eager to act on the drug problem but also tells us that there is a lot of confusion about what to do. Widespread urine testing for drugs may result in better productivity, or it may merely increase alcohol abuse, which happens to be the greater problem in this country today. Drug testing in the absence of good evaluation and counseling may actually turn out to be counterproductive.

"Society's heightened concern about this problem presents a great opportunity. The question is what works and what doesn't—and that is precisely what our research here is seeking to answer."

Dr. Robert Millman, director of the Employee Development Center, outside the center's office on East 57th Street.

Burns

Burn center coordinator Judy Flagg shows a kindergarten youngster in Richmond Hill, Queens, how to escape from a fire by crawling under the smoke.

"Never add lighting fluid to a charcoal barbecue once the fire is going," Judy Flagg, coordinator of the NYH-CMC burn center, tells a group in Queens. "You may do it a hundred times and nothing will happen. But if the invisible vapors from the fluid ignite, you're almost sure to find yourself instantly enveloped in flames. The fact is very few people survive this particular accident."

In addition to being a world center for treatment and research, the burn center runs what may be the world's most extensive and aggressive public education program in burn prevention. At least twice a week staff members visit senior citizen groups, PTA meetings, community centers, day-care facilities, schools, corporate groups, and health fairs. The invariable object: to teach burn prevention and simple burn first-aid. The program reached some 18,000 people in person in 1986 and a good many more through an award-winning safety film produced by the center and distributed nationally.

The staff uses all manner of devices to get its message across, including slides, games, music, puppets, visual aids. Pamphlets are in English, Spanish, and Chinese, with Yiddish and Korean to be available soon.

Because the majority of burn victims are the young and the old, the center makes a special effort to reach these groups, particularly in neighborhoods with high incidences of fires. Children are taught a game called "stop-drop-roll" that shows them how to react if they should catch fire. They are shown how to escape from a fire by crawling along the floor under cardboard smoke clouds. Another program targets youngsters who are known to play with matches or set fires. The serious harm they can cause is brought home to them through discussions, slide presentations, and—most persuasive of all—a visit to the burn center, where they have a chance to see at first hand the tragic results of fires. If the reason for their behavior seems to involve more than simple curiosity, they are sent for further evaluation and counseling. Still another program instructs young parents on the many ways in which children can be burned—for example, from bath water or microwave ovens or the buckles of car seat belts or the sun.

The burn center's is one of many public educational programs sponsored by the medical center or its clinical departments. For example, the Good Samaritan program, inaugurated in 1985 by the department of community relations, offers extensive educational programs at community sites in Yorkville, Roosevelt Island, and Long Island City/Astoria, and mails an informational newsletter to some 40,000 people in those neighborhoods.

Always a locus for the education of health professionals and scientists, the New York Hospital-Cornell Medical Center has broadened its educational function: it is now a vital source of public education as well.

Teen Pregnancy

In New York City last year some 10,000 babies were born to unwed teenagers, a total accounting for close to 10 percent of all births in the city. From that single fact stem many potential problems. Infants born to teenagers have a higher-than-average risk of being premature, low in weight, and sick. Surviving birth, they have a greater-than-average risk of growing up on welfare, of suffering child abuse, and ultimately of becoming unwed teenage mothers themselves and perpetuating the whole cycle.

"To make the greatest impact, a program should deal with all these potential problems," says Dr. Katherine LaGuardia, who heads the Cornell Adolescent Pregnancy Program, established last year by the medical center's department of obstetrics and gynecology. Accommodating about 300 youngsters a year—about 60 percent of whom come from Inwood House, one of three maternity shelters in the city—the program provides comprehensive prenatal services for youngsters 18 years and under. It furnishes much-needed care and counseling and offers a range of social and educational services geared to the needs of these adolescents.

Last year a framework was established to integrate postnatal services into the adolescent pregnancy program, so that teenagers can look to a single source for care and support before and after delivery. Through the participation of the department of pediatrics, programs have been developed that provide extensive follow-up care for the infants of adolescent mothers and for the mothers themselves and that offer counseling and support services for the mothers. An anticipated link-up with a public high school in Queens will bring critical educational and day-care components into the program.

"The Cornell Adolescent Pregnancy Program represents prevention at several levels," says Dr. LaGuardia. "Our objectives are to prevent medical complications in pregnancy, decrease the incidence of repeat unintended pregnancy, and facilitate the mother's return to school. By taking this comprehensive approach, we have the best chance of positively influencing these young mother's lives and reducing the burden on society as a whole."

Dr. Katherine LaGuardia, a fellow in public health and obstetrics and gynecology, with two patients of the Cornell Adolescent Pregnancy Program, established last year.

AIDS

"In the foreseeable future, education and behavioral change will be the principal means of preventing the spread of AIDS," observes Dr. Samuel W. Perry, a professor of psychiatry at New York Hospital-Cornell Medical Center and a member of its AIDS task force. The department of psychiatry currently has 12 ongoing or anticipated programs that are related either to AIDS prevention or to the social or psychological ramifications of the disease.

Dr. Perry is the chief investigator of a major prevention project that targets two groups—people who have tested positive for the AIDS virus but who have no symptoms of the disease and people who have tested negative but are at particular risk of becoming infected. Funded by a $907,000 grant from the National Institute of Mental Health, the study has enrolled more than 300 volunteers, who learn about it from newsletters or drug treatment centers or gay support groups or from the media.

Participants in the project are randomly assigned to one of three procedures. One group has seven weekly sessions with a therapist and follow-up appointments or phone calls for problems that may develop. Patients do role-playing that helps them inform sex partners about their infection, and families are sometimes invited to therapy sessions. The second group of participants is counseled for one session, given literature on AIDS prevention, and followed by phone for several months. The third group gets one session that is combined with an interactive video computer course developed at the department of psychiatry's media center. The course, which can be taken in private at the participant's own pace, consists of questions on AIDS and AIDS prevention: if the subject chooses a wrong answer, the computer provides further information; if he chooses the correct answer, the computer moves on to the next chapter until the course is completed. Dr. Perry sees the course as a potentially useful tool for hospitals, schools, and testing centers.

Essential to all three approaches is motivating participants to adopt appropriate behavior—which may mean giving up unsafe and anonymous sexual practices or using condoms or being candid with present or future sex partners or desisting from sharing needles or coming to terms with the idea that one cannot have children. All three approaches teach meditation and relaxation techniques on the theory that diminished anxiety will result in diminished impulsive or irresponsible behavior. All three involve explaining in considerable detail what the safest methods of sex are and how to achieve sexual gratification without having intercourse. Often patients' guilt and anxiety can be countered by the pride that comes from protecting others and from a sense of mastery over one's actions.

A possible outcome of the study may be that individual treatment is the most effective method but costs too much to be realistic on a large scale; the question may then become which technique works best in terms of cost as well as effectiveness. Meanwhile manuals for each procedure are being developed so that each can be widely disseminated. Dr. Perry invites anyone who may have been exposed to the AIDS virus and is interested in participating in the study to phone him at 212-472-6899.

Dr. Samuel Perry, a member of the medical center's AIDS task force, heads a major prevention study that focuses on two groups—people who have tested positive for the AIDS virus but have no symptoms of disease and people who are at particular risk of being infected.

REACHING OUT

Lifeline

An 81-year old woman who lives alone falls while in the bathroom. Although conscious, she cannot reach a phone, and it is unlikely that her cries for help will be heard. In some circumstances, the consequences of this fall might be tragic. In this case, the woman presses a button on a necklace that links her to a system called Lifeline. The subscriber's touch activates a signal that is transmitted over her home telephone line to a receiving computer in the emergency department of the New York Hospital. There, in the paramedic dispatch area, a file contains her health record and the names of three responders—friends, relatives or neighbors who have keys to the apartment.

Alerted by the subscriber's signal, the dispatcher telephones her apartment. When she fails to answer, he notifies a responder, who goes to the apartment and finds that the woman has apparently injured herself in falling. The responder calls the dispatcher, who sends an ambulance. Had no responder been available, the dispatcher would have sent an ambulance on his own.

"More than any other group, the elderly needs access to emergency medical care," says Dr. Marc E. Weksler, Irving Sherwood Wright Professor of Geriatrics. "Lifeline provides that link."

The Rosenfeld Heart Foundation funded the establishment of Lifeline at the New York Hospital, the only hospital in Manhattan to have such a program. In 1986 the system responded to more than 500 emergencies, 35 percent of which were successfully handled by a responder and 56 percent of which required acute care at the hospital. Lifeline has some 150 subscribers, with new ones being enrolled by Jodi Silverman, a social worker in the division of geriatrics of the department of medicine.

In addition to Lifeline, the medical center sponsors many other programs that reach out to the elderly in the community. For example, the division of geriatrics furnishes medical services to Elderplan, one of four social health maintenance organizations in the nation.

As for the subscriber who fell, it turned out that she had broken her hip. After appropriate therapy in the hospital, she recovered and her family thought it might be time for her to stop living alone. But, treasuring her independence, she chose to return home, knowing she had a safety link that she could always count on.

Rose Tannenbaum, 93, is one of 150 subscribers to Lifeline, a system that provides instant access to emergency care for the disabled or elderly. Elizabeth Berman (divider page) is a mere 91.

Emergency Services

On May 30, 1985, a woman was strolling on a midtown street during her lunch hour when a construction crane toppled over and pinned her beneath it. For the next six hours, while workmen struggled to free her and the city held its collective breath, two New York Hospital paramedics supplied equipment, medicine, and intravenous units to two other paramedics stationed beneath the crane. For their part in this extraordinary rescue, Michael Roberts and John Fisher received official proclamations of appreciation from the city.

Since the hospital's ambulance service joined the city's Emergency Medical Services system (EMS) in 1983, the number of calls it receives annually has more than doubled. Last year emergency paramedics, under the medical direction of assistant attending physician Dr. Michael Zullo, responded to about 4,000 EMS emergencies, activated by the city's 911 system. NYH ambulances also responded to 3,000 calls that came directly to the hospital, more than 1,200 of which were neonatal, pediatric, and maternal emergencies.

The center's expanded role as an emergency transportation facility is in keeping with its growth as an emergency-care facility. The EMS system has designated NYH-CMC as one of three burn centers in Manhattan—to which serious burn cases are taken even if a less specialized unit is closer to the scene—and as one of five trauma centers, specifically designated for the treatment of severely injured patients. Headed by Dr. Roger Yurt, an associate attending surgeon, the trauma center is staffed by nine members of the surgical attending staff assisted by surgical residents, and is on five-minute-availability status 24 hours a day every day of the year. In addition, the department of ophthalmology last year established a unit that has been designated a regional center for eye injuries.

In a further significant development, Dr. Joseph McAuley was appointed early in 1987 as director of the medical center's emergency department, bringing to that position a distinguished record in emergency care extending from Vietnam to major inner-city hospitals.

Paramedics in action in the emergency room and in the field. Between calls activated by the city's 911 system and calls that come directly to the hospital, the medical center's 40 paramedics answer about 7,000 emergencies a year.

St. Mary's Hospital

In the voluntary health-care sector, academic medical centers have traditionally been known for their particular commitment to low-income people. For the New York Hospital–Cornell Medical Center, that means reaching beyond its immediate neighborhood to areas of the city that are medically underserved—to the Ravenswood public housing project in western Queens, where the medical center runs a major health festival each spring; to Jamaica Hospital in south Queens, where New York Hospital residents serve as the surgical house staff; and to St. Mary's Hospital in Bedford-Stuyvesant, Brooklyn, where medical students train and where the college has initiated an innovative program to attract graduates to serve full-time on the medical staff.

St. Mary's is one of five hospitals that make up the Catholic Medical Center of Brooklyn and Queens, an affiliate of the New York Hospital–Cornell Medical Center since 1984. Two Cornell medical graduates are selected each year for a special program in which they are relieved of most of their medical-school debt in return for two years of service at the 270-bed community hospital. With rising debt among medical students a problem both locally and nationally, the loan-forgiveness program removes a great obstacle for young doctors motivated to practice in low-income areas. To date, six Cornell medical students and graduates have been selected for the program; the first two will complete their residencies and be ready for St. Mary's in July 1988.

"Financial pressures are a major deterrent to working in the inner city," says one of the six, Dr. Montgomery Douglas, now undergoing residency training in family practice. "By diminishing those pressures, the Cornell program provides a great opportunity to make a contribution where it's most needed."

Kenneth Vega, a third-year student at Cornell University Medical College, outside St. Mary's Hospital, an affiliate of the medical center in Bedford-Stuyvesant, Brooklyn.

January In response to a shift in Medicare payment regulations in New York State, the New York Hospital instituted a new case-management system to ensure quality of care under the new regulations. . .Three new members joined the hospital board of governors—Michel David-Weill, a senior partner of Lazard Freres & Co.; Vernon E. Jordan Jr., a partner in the law firm of Akin, Gump, Strauss, Hauer and Feld and former president of the National Urban League; and Carroll Petrie, a philanthropist and twice co-chairman of the medical center's annual "Cabaret!" benefit.

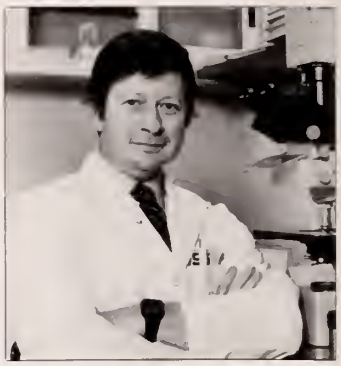
February The second annual Cornell University Medical College Conference on Health Policy took as its theme, "From Physician Shortage to Patient Shortage: The Uncertain Future of Medical Practice." The two-day conference was chaired by Professor Eli Ginzberg of Columbia University. . . An eye trauma center was established at NYH-CMC as a regional center for the treatment of eye injuries. The unit is staffed 24 hours a day throughout the year by ophthalmologists and micro-surgeons skilled in trauma care.

March At the sixth annual Maurice R. Greenberg Award Dinner, awards for distinguished service to the medical center were presented to Dr. John T. Ellis, pathologist-in-chief and chairman of the department of pathology, and, posthumously, to Dr. Herbert Conway, who established and directed the medical center's training program in plastic and reconstructive surgery.

April It was announced that Mr. and Mrs. Harry B. Helmsley had donated $33 million to the New York Hospital, the largest single gift received by the hospital since the opening of the medical center in 1932. The gift is intended to support a major modernization program, a key element of which is a 36-storey building to be called the Helmsley Medical Tower at the New York Hospital-Cornell Medical Center. Three million dollars is to endow and broaden the scope of NYH-CMC's cardiovascular center, also to be named in honor of the Helmsleys. . . Mrs. John Hay Whitney was elected a life governor of the Society of the New York Hospital. . . Dr. Lawrence Scherr, director of the department of medicine at North Shore University Hospital and the David J. Greene Distinguished Professor of Medicine at Cornell University Medical College, became president-elect of the 63,000-member American College of Physicians. . . A newly established executive committee of the Lying-In Hospital held its first event, a fashion show and raffle.

May Harry Belafonte was the headliner at "Cabaret! '86," the fourth annual benefit for the medical center. With hospital governors Walter B. Wriston and Mrs. Milton Petrie serving as co-chairmen, the event raised $1.1 million for the center. . . More than 400 alumni and friends of the medical center participated in a biennial alumni reunion. . . For the third year in succession, Dr. Rudolph Leibel, an associate professor of clinical pediatrics, was voted the Elliot Hochstein Teaching Award by the medical college's graduating class. . . Dr. Willard Gaylin, a leading authority on medical ethics, was guest speaker at Cornell's medical commencement, where the alumni award of distinction was presented to Dr. J. Robert Buchanan '54, general director of Massachusetts General Hospital and former dean of CUMC. . . The Florence J. Gould Foundation pledged $1 million to establish a geriatrics/immunology laboratory in the Lasdon Biomedical Research Center. . . Nobel laureate Dr. Francis Crick was the keynote speaker at the sixth annual Vincent du Vigneaud Memorial Research Symposium at the graduate school of medical sciences.

June Dr. Robert B. Millman, a professor of clinical public health and an associate professor of clinical psychiatry, was named the first Saul P. Steinberg Distinguished Professor of Psychiatry and Public Health. The professorship is endowed to support a top scholar in promoting research, education and treatment related to substance abuse and addictive disease. . . The New York Hospital entered into a major affiliation agreement with the Health Insurance Plan of Greater New York (H.I.P.), an HMO with nearly a million members.



At groundbreaking of Lasdon Research Center, Mrs. William Lasdon accepts a commemorative medallion from Dr. Thomas Meikle, Daniel Davison, and Frank Rhodes/ Greenberg Award recipient Dr. John Ellis with Mrs. Ellis/ Dr. Ira Black, first Nathan Cummings Professor of Neurology.

July A new outpatient psychiatric program for the elderly was established at the Westchester division. . . The first tenants, all nurses, moved into the Helmsley Medical Tower.

August Dr. Walter F. Riker Jr., professor emeritus of pharmacology, received the Torald Sollmann Award, one of the most prestigious honors in pharmacology, from the American Society for Pharmacology and Experimental Therapeutics. . . Mr. and Mrs. Bernard Chaus were honored at the medical college in recognition of their $1.25 million endowment of a distinguished professorship in urological oncology.

September Ground was broken for the William and Mildred Lasdon Biomedical Research Center, designed to ensure the medical center's standing in biomedical research into the next century. The building will contain some 147,000 square feet devoted to laboratories and to a new biomedical information center. . . William L. Porter, former dean of MIT's school of architecture and planning, was named consultant for the development of a major portion of the Westchester division's 218-acre property. The development is part of a multifaceted, long-range plan that is expected to generate significant funding for the medical center over the next decade. . . Harry B. Helmsley was elected a life governor of the Society of the New York Hospital. . . June Bingham, an author of books on the relationship of body and mind, was the featured speaker at the medical center's fourth annual symposium on women's health. . . Dr. David D. Thompson, director of the New York Hospital, was the principal speaker at opening exercises marking the start of a new academic year. . . An in-vitro fertilization program was established at the medical center.

October With the latest and most powerful technology in magnetic resonance imaging as its major feature, a not-for-profit practice was opened on East 72nd Street under the leadership of Dr. Joseph P. Whalen, chairman of the medical center's department of radiology. . . More than 400 attended "Windows on the Mind '86," the second annual benefit for the department of psychiatry.

November Dr. David E. Rogers became the first Walsh McDermott Professor of Medicine at the medical college. The professorship was established with a grant from the Robert Wood Johnson Foundation. . . Dr. Ira B. Black, a pioneer in the study of brain hormones and chemical messages, was named the first Nathan Cummings Professor of Neurology, a professorship established through the generosity of the late Mr. Cummings. . . Michel David-Weill, a hospital governor, donated $1.5 million for the establishment of a combined obstetrical and gynecological and surgical intensive care unit. . . Robert M. Braude, a nationally recognized medical research librarian, became the first Frances L. and John L. Loeb Librarian of Medicine at the medical college.

December Peter S. Kalikow, a leading real estate developer, was elected to the hospital board of governors. . . A $500,000 gift from hospital governor Maurice Greenberg, matched by the Starr Foundation, established a $1 million endowment for medical research. . . Prominent members of the minority community attended a benefit luncheon to celebrate CUMC's commitment to its minority students. . . Mrs. William Lasdon gave $1 million as an additional personal pledge to a challenge grant for the Lasdon Biomedical Research Center. . . NYH governor Hays Clark pledged a $1 million gift to the hospital for a purpose to be determined.

Carrying On The Tradition

The New York Hospital–Cornell Medical Center's $300 million capital campaign, the largest fund-raising drive ever undertaken by an academic medical center, has achieved extraordinary success in the past year. As of March 31, 1987, a total of $266 million in gifts and pledges had been received from individuals, foundations, and corporations. We enter the final year of the campaign with a record of increased private support and expanded participation of old and new friends.

The campaign's initial phase was launched in July 1982 with a three-year objective of $125 million. That goal was achieved a year and a half ahead of schedule, thanks to an anonymous gift of $50 million to Cornell University Medical College. Through our long-range planning system, further needs of $175 million were identified in April 1984 for the concluding phase.

This progress reflects our history of volunteer leadership and the crucial role that private philanthropy has played in the history of this medical center. Its founding families—including the Bakers, Morgans, Paynes, Paysons, Rockefellers, and Whitneys—established a magnificent tradition of private giving in which they are now joined by other names, such as Astor, Cantor, Chaus, Clark, Dyson, Fisher, Greenberg, Harkness, Hearst, Helmsley, Lasdon, Loeb, Niarchos, Seaver, Stanton, Starr, and Weiss.

Following are some of the year's highlights.

In September a dinner honored Mr. and Mrs. Harry B. Helmsley for their extraordinary $33 million gift for our major modernization program. In recognition of their generosity, the center's new 36-storey building—providing housing for nurses and other medical center staff, as well as short-term housing for out-of-town patients and their families—is named "The Helmsley Medical Tower at the New York Hospital–Cornell Medical Center." The Helmsleys' gift includes a $3 million endowment for our renowned cardiovascular center, headed by Dr. John H. Laragh.

A $1.5 million gift from Michel David-Weill will be applied to the creation of a new obstetrical-

Capital-campaign co-chairmen Jansen Noyes Jr. (right) and Mrs. John Elliott Jr. with the medical center's vice chairman for external affairs Frank Markoe Jr.

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At "Cabaret! '86"—Walter Wriston, Mrs. Milton Petrie, Mr. and Mrs. Harry Helmsley, Harry Belafonte/ Saul Steinberg Mrs. B. Gerald Cantor

gynecological and surgical intensive care unit. John L. Weinberg provided tremendous impetus to the emergency room renovation with a $1 million commitment. Hays Clark again responded generously with a new $1 million gift. Maurice R. Greenberg and the Starr Foundation each committed $500,000 to the creation of an endowed research fund to be used by the recipient of the annual Greenberg Award.

A gift of $1.5 million from the Robert Wood Johnson Foundation endowed the Walsh McDermott Professorship of Medicine. The Saul P. Steinberg Distinguished Professorship of Psychiatry and Public Health was established by $1.25 million from Reliance Group Holdings, Inc.

On September 22, groundbreaking ceremonies for the William and Mildred Lasdon Biomedical Research Center were held. Funding for the Lasdon Center, made possible by a generous lead gift of $7.5 million from the late Mr. William Lasdon and from Mrs. Lasdon, has been greatly enhanced by recent gifts. Mrs. Lasdon responded to a $5.5 million anonymous challenge grant with an additional $1 million gift. The Florence J. Gould Foundation, Inc. gave $1 million to the department of medicine's laboratory in geriatrics/immunology. The Adrian & Jessie Archbold Charitable Trust pledged $500,000 in unrestricted support, and the Warner Lambert Company committed partial underwriting of a pharmacological laboratory. The development committee of the board of overseers, chaired by Daniel P. Davison, continues to work on completion of the Lasdon Center funding.

Gifts By Constituencies. Individual contributions now amount to over $163 million in the campaign. Total support from foundations exceeds $55 million, and corporate contributions rose to $29 million. Sponsored private research surpassed $50 million. Unrestricted giving has reached $22 million, and over $15 million in bequests and planned gifts are committed.

Under the acting chairmanship of Jansen Noyes Jr., a 26-member administrative board for Partners in Medicine was formed. Established in 1982 with 45 members, Partners now has 950, all donors of $1,000 or more.

Nearly $500,000 was raised from the medical center's annual mail appeal in 1986 for a campaign total of $2.5 million. Mrs. L. Patton Kline superbly directed the center's annual-giving committee.

The Cornell University Medical College Fund reported $629,522 from alumni and faculty, for a campaign total of $3.1 million.

Leadership Initiatives. Since autumn 1982, the Medical Center Advisory Board, led by James H. Evans with the able assistance of Frank Markoe Jr., vice-chairman for external affairs, has offered

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Mrs. Mario Cuomo helps celebrate 25th anniversary of NYH-CMC Clinical Research Center/ Maurice Greenberg Mrs. John Hay Whitney Ruth Stanton

a select group of corporate, professional, philanthropic, and community leaders the opportunity to learn about complex health care issues, and to serve as valued counselors on behalf of New York-Cornell. We are pleased to welcome several new members to this group, including Mrs. Thomas M. Bancroft, Robert S. Birch, Robert Dilenschneider, Mr. and Mrs. Wilbur Friedman, Robert Liberman, Mrs. Donald B. Marron, Mrs. James McEntee, Todd Morgan, Nelson Peltz, and John M. Rudey.

The Departmental Associates—a group of over 100 prominent New Yorkers with interests in medical education and research, chaired by Sanford B. Ehrenkranz and administered by Dr. Marcus Reidenberg—continues its valuable support of fellowships.

The department of obstetrics and gynecology benefitted from the strong involvement of the Executive Committee of the Lying-In Hospital, led by Mrs. Ronald P. Stanton and Mrs. B. Gerald Cantor. On April 1, the committee sponsored its first annual benefit, the Oscar de la Renta Fashion Show and Luncheon, presented by Elizabeth Arden. Co-chaired by Mrs. Samuel A. Seaver and Mrs. D. Dixon Boardman, with Bernadette Castro Guida serving as raffle chair, this event attracted a sell-out crowd of 450 new and old friends, and raised important renovation support.

The Dr. Milton I. Levine Pediatric Chairman's Suite, funded by friends and patients of Dr. Levine, was officially dedicated on September 10. On October 6, a pediatric molecular laboratory was dedicated, made possible by the generosity of the Horace W. Goldsmith Foundation, the Christina Morgan Reimers Memorial Fund, the Gail and Richard Siegel Pediatric Endocrinology Fund, the James J. Colt Foundation, Inc., Mr. and Mrs. Andrea Geisser, and Mr. and Mrs. Peter S. Kalikow.

More than 400 friends attended "Windows on the Mind '86," the second annual benefit for the department of psychiatry, on October 21. This event was co-chaired by Barry Osborn, Payne Whitney Middleton, and Lois Beekman Ehrenkranz. Carole Cushman directed the successful mini-auction, and Mimi Burnham led the new Westchester/Fairfield Support Committee.

The Chairman's Committee for Special Research in Psychiatry, under the lay leadership of Robert Liberman, met monthly with young scientists to learn about and develop funding for mind/brain research. The Holtz Family Fund initiated a drive for a supervised-living residence in Westchester.

The Eye Advisory Council for the department of ophthalmology has been formed, with Bob Hope as honorary chairman and Henry H. Hoyt Jr. as chairman.

Under the continuing presidency of Mrs. Benjamin H. Kean, the Auxiliary of the Society of the New York Hospital has committed essential resources to medical center projects.

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At "Windows on the Mind '86"—Lois Beekman Ehrenkranz, Barry Osborn, Dr. Robert Michels, Payne Whitney Middleton/ Mr. and Mrs. Peter Kalikow

■

At Lying-In benefit—Ivana Trump, Bernadette Castro Guida, Heathea Nye, Pauline Boardman/ Hays Clark/ Mrs. Samuel Seaver with Dr. R. Gordon Douglas Jr.

■

Henry Hoyt Jr./
Mrs. and Mrs. William Randolph Hearst Jr. with Dr. Fred Plum/
Michel David-Weill

Special Activities. "Cabaret!," the annual gala party for the medical center, was held on May 19. Through the outstanding efforts of the co-chairs, Carroll Petrie and Walter B. Wriston, this event, starring Harry Belafonte, raised $1.1 million in unrestricted funds. Our special thanks go to Iris Cantor for her tremendous assistance as chair of the "Cabaret!" journal.

On September 15, the center's fourth annual women's health symposium, co-chaired by Eleanor T. Elliott and Ruth Stanton, focused on "Body and Mind: Getting it all Together...How your Attitudes Affect your Health." The symposium, attended by over 400 New York women leaders, featured Dr. Robert Michels, chairman of the department of psychiatry, and keynote speaker June Bingham.

Mrs. C. Payson Coleman and Dr. R. Gordon Douglas Jr., chairman of the department of medicine, together with an active volunteer committee, ran Visitors Day programs in April and November that were the usual standing-room-only successes. Dr. and Mrs. Thomas J. Fahey Jr. welcomed more than 250 parents to the medical college's sixth Parents Day on October 24.

On October 15, the physicians and research scientists who have lent special assistance toward meeting our institutional objectives were honored at a dinner. Every component of our work has been tremendously supported by the dedication and loyalty of our doctors.

No thanks are adequate to the hospital's director, Dr. David D. Thompson, or to Dr. Thomas H. Meikle Jr., the Stephen and Suzanne Weiss Dean of the medical college, for their tireless leadership in continued development of the medical center's resources.

And Frank Markoe Jr. has been no less dedicated in working toward our goal. We are grateful to him and to the development and public affairs offices for their indispensable help.

With the backing of our friends and many volunteer leaders, and the continuing efforts of our physicians and scientists, we look forward to celebrating the success of the $300 million campaign in 1987.

Eleanor T. Elliott

Eleanor Elliott
Governor,
The Society of the New York Hospital

Jansen Noyes, Jr.

Jansen Noyes, Jr.
Life Overseer,
Cornell University Medical College

■

John Weinberg/
Mr. and Mrs. Bernard Chaus accept a scroll of appreciation from Drs. Thomas Meikle, E. Darracott Vaughan Jr. and Russell Lavengood Jr./
James Evans

Financial Summary

The Society of the New York Hospital, January 1—December 31, 1986

Revenues	$ Millions	%
Net Inpatient Revenue	291.8	86.0
Net Outpatient Revenue	25.5	8.0
Other Operating Revenue	15.2	4.5
Specific Purpose Funds Used to Support Current Operations	4.9	1.5
Total	337.4	100.0%
Expenses		
Salaries, Wages and Benefits	203.0	59.4
Medical and Surgical Supplies, Pharmaceuticals & Other Expenses	80.5	23.6
Medical Malpractice and Other Insurance	16.6	4.9
Depreciation, Interest, Leases and Amortization	41.4	12.1
Total	$341.5	100.0%
Operating Loss	$4.1	
Investment Income and Unrestricted Gifts	$6.8	
Balance Available for Required Equipment Replacement, Building Renovation, New Services, New Hospital Expenses, Etc.	$2.7	

Cornell University Medical College, July 1, 1985—June 30, 1986

Revenues	$ Millions	%
Tuition and Fees	6.5	4.1
Investment Income	9.1	5.7
Restricted Funds for Research and Training	38.4	24.0
State Appropriation	1.3	0.8
Indirect Cost Reimbursement	8.7	5.4
Faculty Practice Plan	79.2	49.5
Other Sources	16.8	10.5
Total Revenues:	160.0	100.0%
Expenses		
Instruction and Research Training	11.9	7.4
Research	33.8	21.1
Libraries and Academic Support	2.8	1.8
Student Services and Student Financial Aid	4.1	2.6
General and Administrative Support	8.7	5.4
Plant Operations	7.3	4.6
Faculty Practice Plan	73.8	46.1
Debt Service	0.7	0.4
Other Expenses and Transfers	16.9	10.6
Total Expenditures:	160.0	100.0%

Statistical Summary, 1986

Services to Patients	Laboratory	2,947,677
	Blood Bank	226,772
	Radioisotopes Services	49,207
	X-Ray Examinations	127,950
	Operations	19,612
	Deliveries	3,288
	Electrocardiograms	75,896
	Electroencephalograms	3,398
	Social Services Interviews	328,923
	Therapy Treatments (Physical, Occupational, Recreational)	264,255
	Transfusions	34,841
	Pharmacy Prescriptions	1,284,984
	Record Room-New Case Records	55,028
	Average Number of Full-Time Employees	5,960.2
Distribution of Beds	Private	
	Baker-Medicine	78
	Baker-Surgery	39
	Obstetrics and Gynecology	29
	Pediatrics	5
	Total Private	151
	Semi-Private	
	Medical/Surgical	485
	Two-Bed Baker-Medicine	57
	Two-Bed Baker-Surgery	31
	Urology	61
	Obstetrics and Gynecology	96
	Pediatrics	107
	Total Semi-Private	837
	Sub-Total Manhattan Division	988
	Newborn Bassinets	44
	Payne Whitney Clinic	108
	Total Manhattan Division	1,140
	The Westchester Division	322
	Grand Total	1,462
Patient Care	Patients Admitted Manhattan Division	39,766
	Newborn	3,328
	Payne Whitney Psychiatric Clinic	1,008
	The Westchester Division	1,365
	Total	45,467
	Patient Days, All Divisions Including Newborn	462,726
	Visits to Day Hospital	10,775
	Visits to Outpatient Clinics	179,374
	Visits to Emergency Pavilion	41,589

Educational Program

Medical Students	399
Graduate Students	140
M.D.-Ph.D. Students *(medical and graduate enrollments)*	54
Degrees Conferred *(1985-86 academic year)*	125
M.D.	102
Ph.D.	20
M.S.	3
Faculty *(including all affiliates—1985-86 academic year)*	2,667
Full-Time	1,109
Part-Time	116
Voluntary	1,442
House Staff *(NYH-CMC only)*	480
Health-Related Students:	
Dental Hygienists	1
Dietetic Interns	18
Medical Social Workers	8
Surgical Assistants	23
Samuel J. Wood Library *(1985-86 academic year)*	
Users	386,172
Journals (titles)	2,088
Total Volumes	136,037
New Books Received	2,735

Profile of Entering Medical Students September 1986 (101 admitted out of total applicant pool of 5,330)

Men	63
Women	38
Minorities	16
New York State Residents	50
College Majors	Science (73); Non-Science (28)
Mean Grade Point Average	3.5
Average Age	23.6
Age Range	21-40

Universities with Three or More Graduates Admitted:

Cornell University	18	Boston College	3
Harvard University	6	Johns Hopkins	3
Univ. of Pennsylvania	5	U. Cal. Berkeley	3
Brown University	4	University of Chicago	3
New York University	4		

Research (July 1, 1985—June 30, 1986)

Federally Sponsored Research—Total Funding	$32,121,430
Privately Sponsored Research—Total Funding	12,608,252
Research Projects Funded—New and Renewals	336

We extend our deepest thanks to the many loyal supporters of the New York Hospital-Cornell Medical Center. If space permitted, we would wish to list each one of these contributors. We are especially grateful to the following donors and friends.

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Auxiliary

Nineteen eighty-six marked the auxiliary's 75th year of service to the New York Hospital. The current organization had its origins in the Social Service Committee founded in 1912 by the wives of three hospital governors. As its activities expanded well beyond social service in subsequent decades, the committee reconstituted itself as the Women's Auxiliary of the Society of the New York Hospital and later simply as the "auxiliary."

Last year the auxiliary donated some $245,000 to hospital projects, including funds provided by its Lying-In Committee to the department of obstetrics and gynecology. Income was derived from contributions, membership dues, the auxiliary gift shop (located in the hospital lobby), TV rentals, and the auxiliary thrift shop (located at 439 East 71st Street). An evening benefit at the Big Apple Circus was held in December.

Major gifts were as follows:

—$45,000 toward the cost of an ambulance for high-risk-infant transport to the hospital's perinatology center;

—$42,500 for the purchase of a jitney to transport community residents to and from appointments at the hospital, this vehicle to operate in tandem with a jitney purchased by the auxiliary in 1982;

—$36,000 to the hospital's department of social work for a geriatric internship program;

—$25,000 for a permanent endowment to provide financial assistance to a medical student with limited income;

—$13,400 for the Cornell Adolescent Pregnancy Program (see page 13).

The auxiliary continues to fund the publication of a quarterly newsletter that appears in the newspaper *Our Town;* to support the diversional crafts programs of the hospital's department of social work; and to contribute to Volunteer Services for the Elderly of Yorkville. The art committee provides an invaluable service through the purchase of paintings, photographs, and other decorative items for the hospital.

Volunteers

In 1986, volunteers at the New York Hospital-Cornell Medical Center contributed a record 58,713 hours of their time working in 55 departments or programs.
In a hospital where the best technology is available to all, volunteers provide that extra special touch by giving freely of their time, energy and love. They provide help as soon as the patient arrives in the admitting department, and give of themselves selflessly through every stage of the patient's hospital stay. Volunteers do make a difference. It is that special smile or handshake or pat on the shoulder that communicates to our patients how much we care about their well-being and comfort.

Awards for service through 1986 are as follows:

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Rita Fabac

20 years
Harriet Fisher

15 years
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10 years
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36,000 hours
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11,000 hours
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10,000 hours
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The New York Hospital–Cornell Medical Center represents an affiliation of the New York Hospital and Cornell University Medical College. Physicians at the medical center have appointments in both institutions.

Chiefs of service at the New York Hospital, with the exception of the physiatrist-in-chief, serve as chairmen of corresponding clinical departments of Cornell University Medical College. Physicians at the hospital have faculty appointments in the medical college. For the sake of simplicity, however, the center's clinical faculty are listed here by their hospital titles only and not by their academic titles.

In addition to the clinical departments, the center also has six basic-science departments. Since the work of these departments consists almost entirely of teaching and research, many basic-science faculty do not have hospital appointments. They are, therefore, listed here by academic title.

The medical center has affiliations with a number of institutions, including the Hospital for Special Surgery, the Burke Rehabilitation Center, Memorial Sloan-Kettering Cancer Center, North Shore University Hospital, Catholic Medical Center of Brooklyn and Queens, St. Barnabas Hospital, the Will Rogers Institute, and LaGuardia Hospital. Because of space limitations, professional staff at these institutions who do not have New York Hospital appointments are not listed in the following pages.

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Virginia Werden, M.D.

Anesthesiology
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Dragan Borovac, M.D.
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Fun-Sun Yao, M.D.
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Pavel Illner, M.D.
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Harry Bienenstock, M.D.
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Jack R. Harnes, M.D.
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Professional-Associate Staff

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Graduate Staff

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John J. Stern, M.D.
Ted P. Szatrowski, M.D.
Jeffrey Tepler, M.D.
Cheryl A. Walters, M.D.
Arnold Leon Weg, M.D.
Mason Shing Young, M.D.

Assistant Physicians
Alberto M. Acosta, M.D.
Kent M. Adler, M.D.
Barbara Alpert Pura, M.D.
Olivier P. Ameisen, M.D.
Alice M. Baruch, M.D.
Gregory I. Berk, M.D.
Lynn Black, M.D.
Stephen T. Brady, M.D.
James A. Burke, M.D., Ph.D
Gregory D. Chapman, M.D.
Paul M. Choi, M.D.
Joseph T. Cooke, M.D.
Richard H. Dyckman, M.D.
Angie Eng, M.D.
Jose L. Fernandez, M.D.
Laura L. Fisher, M.D.
Rolf Freter, M.D.
Michael F. Giordano, M.D.
Donna F. Heinemann, M.D.
Steven M. Hollenberg, M.D.
Scott Ingber, M.D.
Kethy M. Jules-Elysee, M.D.
Kenneth R. Kafka, M.D.
Joseph L. Kelly III, M.D.
Michael J. Koren, M.D.
Louis A. Kowalski, M.D.
Shirley J. Lee, M.D.
Stewart R. Leftow, M.D.
Stanley Lipkowitz, M.D.
Rachel E. Lipson, M.D.
John D. Lupiano, M.D.
Ben D. McCallister Jr., M.D.
Roger E. Mendis, M.D.
George A. Mensah, M.D.
Marnin A. Merrick, M.D.
Ashis Mukherjee, M.D.
Jeffry L. Nestler, M.D.
Bach-Yen T. Nguyen, M.D.
Amy P. Patterson, M.D.
George Philip, M.D.
Elizabeth Ramos, M.D.
K. Daniel Riew, M.D.
Diane C. Rudolph, M.D.
Roseann M. Russo, M.D.
Lisa R. Sammaritano, M.D.
Daniel R. Schwartz, M.D.
Gary N. Schwartz, M.D.
Peter L. Scudera, M.D.
Steven J. Shiff, M.D.
Clayton A. Smith, M.D.
Sarah A. Stahmer, M.D.
Jo-Ann Suna, M.D.
Joseph P. Tassoni Jr., M.D.
Alan N. Tenaglia, M.D.
Sabino R. Torre, M.D.
Rebecca L. Tung, M.D.
Leslie A. Vensel, M.D.
Mary H. White, M.D.
John Wong, M.B.,B.S.
Howard J. Worman, M.D.

Interns
Karen A. Abrams, M.D.
William Lee Bailey, M.D.
Charles L. Bardes, M.D.
Paul I. Chang, M.D.
Thomas G. Chu, M.D., Ph.D
Andrew Costin, M.D.
Ruth M. Crowe, M.D., Ph.D
Charles M. Farber, M.D., Ph.D
Arthur L. Forni, M.D.
Judy A. C. Hlawitschka, M.D.
Ruth-Anne Kelly, M.D.
Brian L. Kelsall, M.D.
Kenneth T. Kim, M.D., Ph.D
Harry R. Koster, M.D.
Howard R. Levin, M.D.
Howard M. Likier, M.D.
Neal Lippman, M.D.
Manuel B. Litchman, M.D.
Ellen E. Mack, M.D.
Carol Mancuso, M.D.
David H. McCullough, M.D.
Roger N. Pearse, M.D., Ph.D
Andrew J. Porges, M.D.
Shahin Rafii, M.D.
Lynn A. Raymond, M.D., Ph.D
Steven L. Reiner, M.D.
Antoinette E. Robinson, M.D.
Jonathan D. Root, M.D.
Elisabeth L. Rosenthal, M.D.
Scott N. Schafrank, M.D.
Robert A. Seder, M.D.
Bruce Siegel, M.D.
Elizabeth Slass, M.D.
Peter H. Stein, M.D.
Nicholas D. A. Suite, M.D.
Cheryl R. Singer Talpalar, M.D.
Paul S. Unger, M.D.
Christine R. Wells, M.D.
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Assistant Physicians (Dermatology)
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Rachel Grossman, M.D.
James G. Krueger, M.D.
Ramsay S. Kurban, M.D.
Alison C. Lindsay-Beltzer, M.D.
Evelyn Placek, M.D.
Mathew C. Varghese, M.D.

Neurology
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Neurologist-in-Chief
Fred Plum, M.D.

Attending Neurologists
Richard Beresford, M.D.
Ira B. Black, M.D.
John P. Blass, M.D., Ph.D
John J. Caronna, M.D.
Fletcher H. McDowell, M.D.
Hart de C. Peterson, M.D.
Jerome B. Posner, M.D.
Donald J. Reis, M.D.
William R. Shapiro, M.D.

Associate Attending Neurologists
Raymond H. Coll, M.D.
Kathleen M. Foley, M.D.
Thomas C. Guthrie, M.D.
Mark S. Horwich, M.D.
Gerald H. Klingon, M.D.
Henn Kutt, M.D.
David E. Levy, M.D.
Gavril W. Pasternak, M.D., Ph.D
Frank A. Petito, M.D.
Richard W. Price, M.D.
William A. Pulsinelli, M.D., Ph.D
David A. Rottenberg, M.D.
John A. Schaefer, M.D.
Gail E. Solomon, M.D.
Peter Tsairis, M.D.
Bruce T. Volpe, M.D.
Philip H. Zweifach, M.D.

Assistant Attending Neurologists
Joshua Adler, M.D.
Laurie L. Barclay, M.D.
Gilbert A. Block, M.D., Ph.D
Jesse M. Cedarbaum, M.D.
Lisa M. DeAngelis, M.D.
Michelle E. Ehrlich, M.D.
Samuel E. Gandy III, M.D., Ph.D
Mark T. Jennings, M.D.
Richard P. Kraig, M.D., Ph.D
Ruth D. Nass, M.D.
Nancy M. Nealon, M.D.
Richard Payne, M.D.
Charles P. Pollak, M.D.
Samuel Rapoport, M.D.
Neal L. Rosen, M.D.
Leonard S. Schleifer, M.D., Ph.D
Lewis N. Travis, M.D.
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Russell W. Walker, M.D.

Clinical Affiliates
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Professional Associate
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Mark Malkin, M.D.

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Emanuel M. Diccio-Bloom, M.D.
Camilo Fadul, M.D.
Arthur Forman, M.D.
Michael Jacewicz, M.D.
Barry D. Jordan, M.D.
Peter C. Phillips, M.D.
Andrew Slivka, M.D.
Mark J. Stillman, M.D.
Jody Lee Tanabe, M.D.
Lynne Taylor, M.D.
Mark J. Tramo, M.D.

Neurologists
Edward B. Bromfield, M.D.
John T. Farrar, M.D.
Edward Feldmann, M.D.
Joelle Mast, M.D.
Michael P. Sethna, M.D.
Mark H. Tuszynski, M.D.

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Denise Barbut, M.B.,B.S.

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Bruce J. Brew, M.D.
Victor M. Erlich, M.D.
Steven A. Goldman, M.D.
Stephen S. Kamin, M.D.
James B. Leverenz, M.D.
Kenneth Maiese, M.D.
Sissel Vorstrup, M.D.
Thomas C. Wessel, M.D.

Obstetrics and Gynecology

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Myron I. Buchman, M.D.
Thomas A. Caputo, M.D.
E. William Davis Jr., M.D.
William P. Given, M.D.
Edward A. Graber, M.D.
Walter B. Jones, M.D.
Robert Landesman, M.D.
John L. Lewis Jr., M.D.
Frederick W. Martens, M.D.
Joseph N. Nathanson, M.D.
Richard A. Ruskin, M.D.
S. Francis Ryan, M.D.
Frederick Silverman, M.D.
E. Thomas Steadman, M.D.
William J. Sweeney III, M.D.

Associate Attending Obstetricians and Gynecologists
Alan S. Berkeley, M.D.
Alfred Brockunier Jr., M.D.
Ronald M. Caplan, M.D.
Lars L. Cederqvist, M.D.
Jerome G. Davis, M.D.
Maurice L. Druzin, M.D.
Bernard N. Nathanson, M.D.
Melville A. Platt, M.D.
Desider J. Rothe, M.D.
Attila Toth, M.D.
William D. Walden, M.D.
Robert E. Wieche, M.D.
Assistant Attending Obstetricians and Gynecologists
Patricia Yarberry Allen, M.D.
Robert G. Armbruster, M.D.
Thomas J. Armbruster, M.D.
Naef K. Basile, M.D.
Ina N. Cholst, M.D.
Patricia Conrad, M.D.
Lawrence E. Cutler, M.D.
Richard J. Derman, M.D.
Vincent du Vigneaud Jr., M.D.
Terri Edersheim, M.D.
George B. Feldman, M.D.
Joseph Finkelstein, M.D.
Jennie A. Freiman, M.D.
Wilma Gladstone, M.D.
Martin Gubernick, M.D.
Enayat Hakim-Elahi, M.D.
Marcia A. Harris, M.D.
Andre Heltai, M.D.
J. Milton Hutson, M.D.
Edward I. Jacobson, M.D.
David F. James, M.D.
Radoslav Jovanovic, M.D.
Robert E. Kaye, M.D.
Alan A. Kessler, M.D.
Nancy B. Lebowitz, M.D.
Louis J. Lissak, M.D.
Robert N. Melnick, M.D.
Edward K. C. Mok, M.D.
Amen Ness, M.D.
Gideon G. Panter, M.D.
Joseph I. Paris, M.D.
Reginald T. Puckett, M.D.
Zoltan I. Saary, M.D.
Robert I. Sassoon, M.D.
Kathryn A. Schrotenboer, M.D.
Ida Ellen Schwab, M.D.
Daniel H. Smith, M.D.
Michael J. Strongin, M.D.
Fouad Surur, M.D.
Yvonne S. Thornton, M.D.
Miklos Toth, M.D.
David B. Weinstein, M.D.
Clinical Affiliate
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Associate Attending Psychiatrist
John M. Astrachan, M.D.

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Scott H. Bailey, M.D.
Annette L. Bond, M.D.
Anne T. Carlon, M.D.
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David M. Roth, M.D.
Assistant Obstetricians and Gynecologists
Diana M. Adams, M.D.
Judith A. Carpentier, M.D.
Sara A. Cartmell, M.D.
Deborah M. Cerar, M.D.
Gina A. Dunston, M.D.
Alice B. Gibbons, M.D.
Gary H. Goldman, M.D.
James A. Grifo, M.D.
Emily Hartzog, M.D.
Joan L. Kent, M.D.
Victoria M. Leiphart, M.D.
Beth G. Marcaccio, M.D.
Janice Marks, M.D.
Nicole L. Noyes, M.D.
Anne Regenstein, M.D.
David B. Sable, M.D.
Robert L. Steer, M.D.
Judith C. Wenger, M.D.

Ophthalmology

Medical Staff

Ophthalmologist-in-Chief
D. Jackson Coleman, M.D.
Attending Ophthalmologists
David H. Abramson, M.D.
William C. Cooper, M.D.
Robert M. Ellsworth, M.D.
Ira H. Kaufman, M.D.
Harvey A. Lincoff, M.D.
Alfred E. Mamelok, M.D.
Walter L. Peretz, M.D.
Richard C. Troutman, M.D.
Philip H. Zweifach, M.D.
Associate Attending Ophthalmologists
Stephen E. Bloomfield, M.D.
Stanley Chang, M.D.
Thomas D. Cherubini, M.D.
Laurence S. Harris, M.D.
David B. Karlin, M.D.
Peter L. Laino, M.D.
Richard S. Muchnick, M.D.
David Paton, M.D.
Suzanne Veronneau, M.D.
Michael E. Yablonski, M.D.
Assistant Attending Ophthalmologists
Dianne Aronian, M.D.
Barry M. Belgorod, M.D.
Scott E. Brodie, M.D.
Vincent P. deLuise, M.D.
Martin Ehrenberg, M.D.
Yale L. Fisher, M.D.
Scott H. Greenstein, M.D.
Judith E. Gurland, M.D.
Murk-Hein Heinemann, M.D.
Yaffa Kahanowicz, M.D.
Marlene R. Krauss, M.D.
Mark A. Lieberman, M.D.
Rosemarie Fusco Marks, M.D.
Norman B. Medow, M.D.
Robert F. Munsch, M.D.
Gerard M. Nolan, M.D.
Peter M. Odell, M.D.
David B. Pearce, M.D.
Thomas A. Poole, M.D.
Calvin W. Roberts, M.D.
Lauren R. Rosecan, M.D., Ph.D
Susan I. Rosen, M.D.
James S. Schutz, M.D.
Jesse Sigelman, M.D.
Michael B. Starr, M.D.
Robert R. Strome, M.D.
Timothy P. Sullivan, M.D.
James W. Talbot, M.D.
Eugene E. Weise, M.D.
Andrew W. Wendling, M.D.
Wayne G. Whitmore, M.D.
Dean J. Yimoyines, M.D.

Graduate Staff

Clinical Fellows
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Robert Lopez, M.D.
Harvey N. Masonson, M.D.
Alan L. Wagner, M.D.
Robert A. Weiss, M.D.
Ophthalmologist
Andrew W. Danyluk, M.D.
Assistant Ophthalmologists
Alan F. Bloom, M.D.
Patrick H. Dennis Jr., M.D.
Patrick L. R. Farrell, M.D.
David T. Garrett, M.D.
Michael B. Rivers, M.D.
Carol A. Springer, M.D.
Jeffrey L. Taveras, M.D.
Susan M. Yeomans, M.D.

Otorhinolaryngology

Medical Staff

Otorhinolaryngologist-in-Chief
Robert W. Selfe Jr., M.D.
Attending Otorhinolaryngologists
James A. Moore, M.D.
Roy B. Sessions, M.D.
Associate Attending Otorhinolaryngologists
Norman J. Pastorek, M.D.
W. Shain Schley, M.D.
Assistant Attending Otorhinolaryngologists
Lloyd R. Dropkin, M.D.
William F. Flynn, M.D.
Inocencio C. Kho, M.D.
Steven B. Levine, M.D.
Thomas C. McLure III, M.D.
Samuel Nodelman, M.D.
Assistant Attending Pediatrician
Gary J. Noel, M.D.

Graduate Staff

Clinical Fellows
Tam Bui, M.D.
Robert F. Ward, M.D.
Assistant Otorhinolaryngologists
Philip Chironis, M.D.
Anthony DeGennaro, M.D.
Christopher J. Linstrom, M.D.

Pathology

Medical Staff

Pathologist-in-Chief
John T. Ellis, M.D.
Attending Pathologists
Daniel R. Alonso, M.D.
Carl G. Becker, M.D.
Frederick A. Jakobiec, M.D.
Aaron Kellner, M.D.
Elmer E. Kramer, M.D.
N. Scott McNutt, M.D.
Myron R. Melamed, M.D.
C. Richard Minick, M.D.
Janet A. Mouradian, M.D.
George E. Murphy, M.D.
Carol K. Petito, M.D.
Charles A. Santos-Buch, M.D.
Associate Attending Pathologists
Peter G. Bullough, M.D.
Carl F. W. Wolf, M.D.
Assistant Attending Pathologists
M. Lita Alonso, M.D.
James B. Amberson, M.D. (leave of absence)
Adolfo Firpo, M.D.
Patricia M. Fishman, M.D.
Marina Gerber, M.D.
Thomas A. Godwin, M.D.
Winston G. Harrison, M.D.
June H. Koizumi, M.D.
Margret L. S. Magid, M.D.
Gregory J. Naus, M.D.
Powers Peterson, M.D.
Philip G. Prioleau, M.D.
Deborah S. Schron, M.D.
Annie M. Strupp, M.D.

Professional-Associate Staff

Professional Associates
Raju S. K. Chaganti, Ph.D.
Renate F. Klein, Ph.D.
Laurence B. Senterfit, Sc.D.

Graduate Staff

Assistant Pathologists (Dermatopathology)
Barry J. Kuttner, M.D., Ph.D
George Niedt, M.D.
Assistant Pathologists
Anthony J. Cecalupo, M.D.
Amy Chadburn, M.D.
Brian K. Chamides, M.D.
Ian Scott Cornell, M.D.
Richard J. Cote, M.D.
George A. Evans, M.D.
Andrew Farb, M.D.
Juan C. Felix, M.D.

Priscilla I. Figueroa, M.D.
Nir Kossovsky, M.D.
Susan D. Leslie, M.D.
Steven H. Lewis, M.D.
Susan Morgello, M.D.
Marla Onishi-Tannenbaum, M.D.
Joseph L. Rayburn, M.D.
Interns
Steven M. Erde, M.D., Ph.D
Dani Swartz, M.D.

Pediatrics
Medical Staff
Pediatrician-in-Chief
Maria I. New, M.D.
Attending Pediatricians
Peter A. M. Auld, M.D.
Kathryn H. Ehlers, M.D.
Mary Allen Engle, M.D.
James L. German III, M.D.
Robert J. Haggerty, M.D.
Margaret W. Hilgartner, M.D.
Alfred N. Krauss, M.D.
Aaron R. Levin, M.D.
Florence N. Marshall, M.D.
Wallace W. McCrory, M.D.
Rebecca F. Notterman, M.D.
Richard J. O'Reilly, M.D.
George M. Owen, M.D.
Hart de C. Peterson, M.D.
Irwin Rappaport, M.D.
Alfred L. Scherzer, M.D.
Mervin Silverberg, M.D.
Charlotte T. C. Tan, M.D.
Associate Attending Pediatricians
Richard R. Bass, M.D.
Otto E. Billo, M.D.
Arthur E. Brown, M.D.
William R. Brown Jr., M.D.
Benedict S. Caterinicchio, M.D.
Leon I. Charash, M.D.
Fredric Daum, M.D.
Alan P. DeMayo, M.D.
Paul J. Edelson, M.D.
Alvin N. Eden, M.D.
Zulema Fischbarg, M.D.
William W. Frayer, M.D.
Joseph M. Gertner, M.B.,B.Ch.
Fereshteh Ghavimi, M.D.
Patricia-Jane Giardina, M.D.
Arthur A. Klein, M.D.
Rudolph L. Leibel, M.D.
Ralph I. Lopez, M.D.
Thomas J. Marr, M.D.
Paul A. Meyers, M.D.
Virginia C. Mitty, M.D.
Karl Neumann, M.D.
Bertrand L. New, M.D.
John E. O'Loughlin, M.D.
Songya Pang, M.D.
Melvin S. Rosh, M.D.
Myles S. Schiller, M.D.
William T. Seed, M.D.
David I. Smith, M.D.
Gail E. Solomon, M.D.
Josef Soloway, M.D.
Laurel J. Steinherz, M.D.
Peter G. Steinherz, M.D.
Assistant Attending Pediatricians
Paul M. Baker, M.D.
Franz-Josef Baska, M.D.
Diane E. Bloomfield, M.D.
Renee M. Brilliant, M.D.
Joel A. Brochstein, M.D.
Jeffrey L. Brown, M.D.
James B. Bussel, M.D.
Brenda I. Caparros-Sison, M.D.
Ralph E. Caprio, M.D.
Walter T. Carpenter, M.D.
Barbara Ann Dash, M.D.
Miles H. Dinner, M.D.
Diane K. Donley, M.D.
Gary E. Eddey, M.D.
Gloria T. Edis, M.D.
Michelle E. Ehrlich, M.D.
Murray Engel, M.D.
Nunzia Fatica, M.D.
John J. Ferry Jr., M.D.
Michael P. Fitzgerald, M.D.
Lambros G. Geotes, M.D.
Kira A. Geraci-Ciardullo, M.D.
Michael A. Giuliano, M.D.
Mark S. Glassman, M.D.
Leonard T. Goslee, M.D.
Eric F. Grabowski, M.D.
Armando E. Grassi, M.D.
Katherine A. Hajjar, M.D.
Stephen P. Herman, M.D.
Kenneth J. Higgins, M.D.
Paul Horowitz, M.D.
Mark T. Jennings, M.D.
Valerie L. Johnson, M.D.
Stewart Kaplan, M.D.
Katherine J. Karlsrud, M.D.
Rebecca L. Katz, M.D.
Nancy A. Kernan, M.D.
Daniel B. Kessler, M.D.
Ben Kritchman, M.D.
Alberto Lacoius-Petruccelli, M.D.
Howard Lantz, M.D.
Shelley Lanzkowsky, M.D.
Joseph Laver, M.D.
Uri Lavy, M.D.
Michael L. Lewin, M.D.
Roy H. Lieberman, M.D.
Evelyn G. Lipper, M.D.
Sidney S. Marder, M.D.
Reginald D. McLaughlin, M.D.
Richard G. Merkler, M.D.
Francisco Montano, M.D.
Ruth D. Nass, M.D.
Robin Nemery, M.D.
Meryl F. Newman-Cedar, M.D.
Gary J. Noel, M.D.
Daniel A. Notterman, M.D.
Paul E. Palumbo, M.D.
Dorothy M. Pietrucha, M.D.
Arlene Redner, M.D.
Rueben H. Reiman, M.D.
Neal L. Rosen, M.D.
Andrew S. Rosenblum, M.D.
Suzanne Rosenfeld, M.D.
Ingrid K. Rosner, M.D.
Marjorie Schulman, M.D.
Alina A. Serdakowska, M.D.
Allan James Shapiro, M.D.
Donald R. Skog, M.D.
Cecelia A. Slater, M.D.
Michael S. Snyder, M.D.
Barney Softness, M.D.
Phyllis W. Speiser, M.D.
Gerald M. Spielman, M.D.
William Spivak, M.D.
Joel Steckelman, M.D.
Ralph Stein, M.D.
Mitchell A. Stevens, M.D.
Elizabeth Stoner, M.D.
Jerzy A. Szatkowski, M.D.
Jean W. Temeck, M.D.
Mary Y. Y. Tsai, M.D.
Mary Van Zyl, M.D.
Russell W. Walker, M.D.
Priscilla J. Ware, M.D.
David J. Weinstock, M.D.
Adrienne L. Weiss-Harrison, M.D.
Janet M. Werkmeister, M.D.
James D. Wilkinson, M.D.
Edward Yanowitz, M.D.
David Zigelman, M.D.
Clinical Affiliates
Myron Beer, M.D.
Norman Berkowitz, M.D.
Marc Bestak, M.D.
Stephen Bates Billick, M.D.
Jan L. Breslow, M.D.
Anne E. Dyson, M.D.
Jesus I. Espinoza, M.D.
Diane B. Gareen, M.D.
Doris K. Goldberg, M.D.
Albert C. Holtzman, M.D.
Lisa Cooper Hudgins, M.D.
Elizabeth T. Khuri, M.D.
Phyllis S. Landau, M.D.
Robert H. Lustig, M.D.
Robert Rapaport, M.D.
Francine Siegel-Stein, M.D.
Ladd Spiegel, M.D.
Constance Stewart, M.D.
Ernest B. Visconti, M.D.
Perrin C. White, M.D.
Judith P. Willner, M.D.
Attending Psychiatrist
Theodore Shapiro, M.D.
Associate Attending Psychiatrist
Miriam Sherman, M.D.
Assistant Attending Psychiatrist
Hans F. Huebner, M.D.
Associate Attending Radiologists
Paula W. Brill, M.D.
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Professional-Associate Staff
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Gail Ross, Ph.D.

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Ruth F. Lax, Ph.D.
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Bruce Sutton, M.D.
Carol J. VanderZwaag, M.D.
Audrey M. Walker, M.D.
Carol J. Weiss, M.D.
Martin Wilner, M.D.
Philip J. Wilner, M.D.

Graduate Staff—Westchester Division

Clinical Fellow
Ashok K. Patel, M.D.

Psychiatrist
Robin M. Hamilton, M.D.

Assistant Psychiatrists (Child Psychiatry)
Mark Banschick, M.D.
Katherine A. Belton, M.D.
Babette B. Caraccio, M.D.
Gabriel Kaplan, M.D.
Peter H. Robbins, M.D.
Richard W. Saxton, M.D.

Assistant Psychiatrists
Susan G. Abraham, M.D.
Tedd H. Ackerman, M.D.
Carol L. Alter, M.D.
Jeffrey D. Bedrick, M.D.
Bryan V. Boffi, M.D.
Devra Braun, M.D.
Stephen E. Buie, M.D.
Janis Chester, M.D.
Deborah A. Deliyannides, M.D.
Susana G. Duncan, M.D.
Taryn Fishman, M.D.
Richard A. Flamberg, M.D.
Kim A. Gutner, M.D.
Roger M. Harris, M.D.
Mark A. Heitner, M.D.
Judith Herzig, M.D.
Alex E. Horwitz, M.D.
Lawrence Kelmenson, M.D.
Thomas E. Knox, M.D.
Dario La Rocca, M.D.
Julio Licinio, M.D.
Gregory T. Lombardo, M.D.
Ronald N. Marcus, M.D.
Gregory Q. Marsella, M.D.
Ruth Held Martin, M.D.
Richard H. McCarthy, M.D.
Danielle Murstein, M.D.
David Pelino, M.D.
Bradford B. Perry, M.D.
Steven J. Romano, M.D.

Margot S. Rubinstein, M.D.
Mark A. Scher, M.D.
Ellen K. Schlefer, M.D.
Mark E. Servis, M.D.
Bennett L. Solnick, M.D.
Madeleine Stam, M.D.
Alan L. Steinberg, M.D.
Jeffrey E. Taxman, M.D.
Mariann Turato, M.D.
Heidi Van Bellingham, M.D.
Carol W. Weinstein, M.D.
L. Adele West, M.D.

Radiology

Medical Staff

Radiologist-in-Chief
Joseph P. Whalen, M.D.
Attending Radiologists
David V. Becker, M.D.
Yahya M. Berkmen, M.D.
Florence C. Chu, M.D.
Michael D. F. Deck, M.B.,B.S.
John A. Evans, M.D.
Robert H. Freiberger, M.D.
David B. Hayt, M.D.
Jae Ho Kim, M.D.
Lourdes Nisce, M.D.
Nathan Poker, M.D.
Thomas A. Sos, M.D.
R. Caird Watson, M.D.
Patricia Winchester, M.D.
Associate Attending Radiologists
Mostafa A. Batata, M.D.
Paula W. Brill, M.D.
F. Mitchell Cummins, M.D.
Bernard Ghelman, M.D.
Amy Beth Goldman, M.D.
Antonio F. Govoni, M.D.
James R. Hurley, M.D.
Elias Kazam, M.D.
Helene Pavlov, M.D.
William A. Rubenstein, M.D.
George Stassa, M.D.
Hind S. Teixidor, M.D.
Robert D. Zimmerman, M.D.
Assistant Attending Radiologists
Gerald F. Abbott, M.D.
Steven A. Albert, M.D.
Yong H. Auh, M.D.
Richard D. Becker, M.D.
Barbara Lucile Binkert, M.D.
Georgia A. Cataldi, M.D.
Kenneth S. Crystal, M.D.
Sheila D. Davis, M.D.
Andrew W. Haraway Jr., M.D.
Linda A. Heier, M.D.
Claudia I. Henschke, M.D.
James C. Hirschy, M.D.
Seymour Hopfan, M.D.
Richard J. Katz, M.D.
Young Sook Kim, M.D.
George Krol, M.D.
Miriam Levy-Ravetch, M.D.
Charlynn C. Maniatis, M.D.
John A. Markisz, M.D.
Harvey Morrison, M.D.
Calvin D. Neithamer Jr., M.D.
Grigory Rozenblit, M.D.
Leslie A. Saint-Louis, M.D.
Salil D. Sarkar, M.D.
Robert Schneider, M.D.
Scott J. Sherman, M.D.
Gordon Sze, M.D.
Bhadrasain Vikram, M.D.
Kenneth Zirinsky, M.D.
Clinical Affiliate
Martin Barandes, M.D.

Professional-Associate Staff

Attending Physicist (Nuclear Medicine)
Rodney E. Bigler, Ph.D.
Assistant Attending Physicist (Nuclear Medicine)
Pat Zanzonico, Ph.D.
Professional Associate (Physics)
Stephen Balter, Ph.D.

Graduate Staff

Clinical Fellows
James L. Amster, M.D.
Antonio G. Bermudez, M.D.
Howard G. Butler, M.D.
Sylvie Destian, M.D.
Lawrence E. Ginsberg, M.D.
Roberto L. Gonzalez-Sala, M.D.
Alison Bender Haimes, M.D.
Craig J. Hart, M.D.
Anna Kelly, M.D.
Susan C. Krysiewicz, M.D.
Bonnie G. Lemberg, M.D.
David P. C. Liu, M.D.
Chandra Nataraj, M.D.
Niranjan K. Parekh, M.B.,B.S.
Abraham Port, M.D.
David J. Rubenstein, M.D.
William G. Stanton, M.D.
David A. Wojtasek, M.D.
David F. Yankelevitz, M.D.
Assistant Radiologists (Nuclear Medicine)
Susan M. Ascher, M.D.
Kodanullur Subramanian, M.D.
Assistant Radiologists
Thomas P. Boyle, M.D.
Samuel Choi, M.D.
Patricia E. Cole, M.D.
Gerard A. Compito, M.D.
Christopher J. Conners, M.D.
Frank A. DuPont, M.D.
Robert R. Ford, M.D.
Shulamith Goldberg, M.D.
Santiago J. Hernandez, M.D.
Anand S. Jagannath, M.D.
Caren Jahre, M.D.
Risa H. Kent, M.D.
Albert N. Kim, M.D.
Terry L. Levin, M.D.
Laura Liberman, M.D.
Steven V. Lossef, M.D.
Kenneth P. Morrison, M.D.
Bette J. Nyhlen, M.D.
Richard A. Sarner, M.D.
Donna M. Scuderi, M.D.
Craig H. Sherman, M.D.
John Sierra, M.D.

Rehabilitation Medicine

Medical Staff

Physiatrist-in-Chief
Willibald Nagler, M.D.
Associate Attending Physiatrists
Hermina Z. Benjamin, M.D.
Ronald F. Green, M.D.
Emmanuel Rudd, M.D.
Assistant Attending Physiatrists
Subhadra L. Nori, M.B.,B.S.
Irene von Estorff, M.D.
Clinical Affiliates
Irina Barkan, M.D.
Peter H. Stern, M.D.

Professional-Associate Staff

Professional Associates
Michael E. Groher, Ph.D.
R. Paul Jordan, D.P.M.
H. Richard Lehneis, Ph.D.
Lydia Wingate, Ph.D.

Graduate Staff

Assistant Physiatrists
Michael J. Brennan, M.D.
Vishnu Deo-Narine, M.D.
Hope Schuyler Hacker, M.D.
Timothy Hall, M.D.
Sheryl R. Levin, M.D.
Gale Pugliese, M.D.
Michael Sinel, M.D.
John A. Sklar, M.D.

Surgery

Surgeon-in-Chief
G. Tom Shires, M.D.

General Surgery

Medical Staff

Attending Surgeons
William A. Barnes, M.D.
Murray F. Brennan, M.D.
Jerome J. Decosse, M.D.
Peter Dineen, M.D.
William R. Grafe Jr., M.D.
Malcolm O. Perry, M.D.*
S. Frank Redo, M.D.**
Albert L. Rubin, M.D.
Kurt H. Stenzel, M.D.
Bjorn Thorbjarnarson, M.D.
George E. Wantz, M.D.
John C. Whitsell II, M.D.
Associate Attending Surgeons
Jhoong S. Cheigh, M.D.
George N. Cornell, M.D.
Armand F. Cortese, M.D.
John Mihran Davis, M.D.
Cleon W. Goodwin, M.D.
Peter M. Guida, M.D.
Vincent F. Marzulli, M.D.
Kevin P. Morrissey, M.D.
Walter F. Pizzi, M.D.
Robert R. Riggio, M.D.
Stuart D. Saal, M.D.
Michael F. Silane, M.D.
Paul A. Skudder, M.D.
William T. Stubenbord, M.D.
John F. Sullivan, M.D.
Luis Tapia, M.D.
Roger W. Yurt, M.D.
Assistant Attending Surgeons
Anthony C. Antonacci, M.D.
John M. Aronian III, M.D.
Philip S. Barie, M.D.
James L. Clarke, M.D.
William T. Curry, M.D.
Kenyon B. Field, M.D.
Jerome Finkelstein, M.D.
James P. Gaston, M.D.
John G. Hansen, M.D.
Stephen F. Lowry, M.D.
Michael R. Madden, M.D.
Carmine J. Mauro, M.D.
Eugene J. Nowak, M.D.
G. Tom Shires III, M.D.
David S. Speer, M.D.
Harry Statman, M.D.
John C. L. Wang, M.D.
Clinical Affiliates
David A. Mayer, M.D.
Earl A. O'Neill, M.D.

**Attending Surgeon-in-Charge, Vascular Surgery Division*

***Attending Surgeon-in-Charge, Pediatric Surgery Division*

Professional-Associate Staff

Surgeons' Assistants
Patrick J. Brennan
Diana L. D'Amelio
Daryl Davidson
Jill M. Downey
Bettye L. Epstein
Donna M. Hamilton
David Johnson
John Lee
Mary L. Lombardi
Geoffrey O'Sullivan
Andrea J. Portenoy
Howard F. Rose
Phyllis G. Scampas
Randy Tymon

Graduate Staff

Clinical Fellows
Athleo L. Cambre Jr., M.D.
Gary A. Fantini, M.D.
Yuman Fong, M.D.
David G. Hesse, M.D.
Michael A. Marano, M.D.
Joseph P. Minei, M.D.
Kevin J. Tracey, M.D.
Surgeons
Allyson A. Askew, M.D.
Anne Marie Billingsley, M.D.
Anthony C. Cahan, M.D.
David Calcagno, M.D.
Lawrence H. Durban, M.D.
Mark S. Gordon, M.D.
Paul H. Halebian, M.D.
Steven L. Parker, M.D.
Douglas E. Paull, M.D.
Assistant Surgeons
James D. Albert, M.D.
James P. Anthony, M.D.
Annabel E. M. Barber, M.D.
Edward M. Beck, M.D.
Mary Sue Brady, M.D.
John M. Brown III, M.D.
W. Michael Canning, M.D.
Eli R. Capouya, M.D.
Daniel G. Ciaburri, M.D.
Michael S. Conte, M.D.
Stephen E. Ettinghausen, M.D.
Thomas J. Fahey III, M.D.
Eva Fischer, M.D.
William F. Flynn Jr., M.D.
Henri R. Ford, M.D.
Neil B. Friedman, M.D.
Louis Gevirtzman, M.D.
Andrew I. Glantz, M.D.
Heidi D. Gorsuch, M.D.
Robert T. Grant, M.D.
Allen B. Jetmore, M.D.
William G. Jones II, M.D.
Stefan G. Karos, M.D.
Wilson Ko, M.D.
Jeffrey Lapeyrolerie, M.D.
Marisa Lawrence, M.D.
William D. Lazenby Jr., M.D.
I. Michael Leitman, M.D.
Joanne E. Low, M.D.
Steven K. Macheers, M.D.
Edward J. Marcaccio Jr., M.D.

Stephen M. Martin, M.D.
M. Victor McLaughlin Jr., M.D.
Peter Michalos, M.D.
Eric J. Miller, M.D.
Joel S. Peck, M.D.
Alan I. Reed, M.D.
Catherine A. Ronaghan, M.D.
Joph Steckel, M.D.
Robert E. Steckler, M.D.
Kenneth K. Tanabe, M.D.
James R. Taylor Jr., M.D.
Joseph R. Vitolo, M.D.
Eric B. Whitacre, M.D.

Cardiothoracic Surgery
Medical Staff

Attending Surgeon-in-Charge
O. Wayne Isom, M.D.
Attending Surgeon
Cranston W. Holman, M.D.
Associate Attending Surgeons
John C. McCabe, M.D.
Arthur J. Okinaka, M.D.
Valavanur A. Subramanian, M.D.
Assistant Attending Surgeons
Michael E. Burt, M.D.
Jeffrey P. Gold, M.D.
Karl H. Krieger, M.D.
Samuel J. Lang, M.D.

Graduate Staff

Clinical Fellow
Barry J. Zadeh, M.D.
Thoracic Surgeons
Phyllis A. Edwards, M.D.
Steven M. Keller, M.D.
Stephen J. Lahey, M.D.
Assistant Thoracic Surgeons
H. Stephen Hudgens, M.D.
Carl Swayze Rigby, M.D.

Dental and Oral Surgery
Medical Staff

Attending Oral Surgeon-in-Charge
Stanley J. Behrman, D.M.D.
Attending Dentist
John J. Putnam, D.D.S.
Associate Attending Dentist (Endodontist)
Nelson I. Mendell, D.M.D.
Associate Attending Dentist (Myo-Functional Therapy)
Harvey Miller, D.D.S.
Associate Attending Dentist (Orthodontist)
Joseph D. Davis, D.D.S.
Associate Attending Dentists (Periodontists)
Seymour M. Koteen, D.D.S.
Joseph E. Rowan, D.D.S.
Associate Attending Dentists (Prosthodontists)
Gerald M. Galvin, D.D.S.
Jason C. Lee, D.D.S.
Ivin B. Prince, D.D.S.
Associate Attending Dentist (Roentgenologist)
J. Kenneth Schmidt, D.M.D.
Associate Attending Dentist (TMJ)
Leonard E. Quitt, D.D.S.
Associate Attending Dentists
Lawrence A. Behrman, D.D.S.
Louis Marino, D.D.S.
Ernest R. Piccaro, D.D.S.
Assistant Attending Oral Surgeons
Steven M. Baum, D.D.S.
David A. Behrman, D.M.D.
Thomas M. Darrigan, D.D.S.
Arthur C. Elias, D.M.D.
Michael R. Glogoff, D.M.D.
Jerry L. Halpern, D.D.S.
Andrew J. Hauser, D.D.S.
Claudia B. Kaplan, D.D.S.
Frederick M. Lifshey, D.D.S.
Peter H. Pruden, D.D.S.
Steven J. Tunick, D.M.D.
Assistant Attending Dentists (Endodontists)
Joseph M. Leavitt, D.D.S.
Sebastian J. Lentini, D.D.S.
Assistant Attending Dentist (Myo-Functional Therapy)
Michael G. Steinberg, D.D.S.
Assistant Attending Dentists (Orthodontists)
Marc S. Lemchen, D.M.D.
Gregory W. Sanford, D.M.D.
Assistant Attending Dentists (Pedodontists)
Louis M. Cooper, D.D.S.
Mark S. Hochberg, D.D.S.
David J. Levine, D.D.S.
Jack L. Mitchell, D.D.S.
Assistant Attending Dentists (Periodontists)
Barry M. Libin, D.D.S.
Philip D. Pack, D.M.D.
George W. Sferra Jr., D.D.S.
Assistant Attending Dentists
Salvatore J. Durante, D.D.S.
Richard F. Giannandrea, D.D.S.
Robert Karsten, D.D.S.
Guy N. Minoli, D.D.S.
Kathleen Morris-Albert, D.D.S.
Jonathan Prince, D.D.S.
Steven Saltzman, D.D.S.
Robert M. Sorin, D.M.D.
Clinical Affiliate (Orthodontist)
Robert M. Cole, D.D.S.

Graduate Staff

Oral Surgeon
James A. H. Tauberg, D.M.D.
Assistant Oral Surgeon
Robert D. Carpenter, D.M.D.
Intern in Oral Surgery
George P. Tavolilla, D.D.S.
Interns—General Practice Residency Program
Judy DiDonato, D.M.D.
Brendan P. Dowd, D.D.S.
Lawrence S. Holtzman, D.M.D.
Jeffrey S. Piekarsky, D.D.S.

Neurosurgery
Medical Staff

Attending Surgeon-in-Charge
Russel H. Patterson Jr., M.D.
Attending Surgeon
Richard A. R. Fraser, M.D.
Associate Attending Surgeons
Joseph H. Galicich Jr., M.D.
Francis W. Gamache Jr., M.D.
Michael H. Lavyne, M.D.
Assistant Attending Surgeon
Robert B. Snow, M.D.

Graduate Staff

Surgeons
Jamshid B. G. Ghajar, M.D.
John B. Robbins, M.D.
Assistant Surgeons
David W. Andrews, M.D.
John M. Emery III, M.D.
Mazen Khayata, M.D.

Orthopedics
Medical Staff

Surgeon-in-Chief, The Hospital for Special Surgery
Philip D. Wilson Jr., M.D.
Attending Surgeons
John H. Doherty, M.D.
Allan E. Inglis, M.D.
John N. Insall, M.D.
Bernard Jacobs, M.D.
Joseph M. Lane, M.D.
David B. Levine, M.D.
Chitranjan S. Ranawat, M.D.
Leon Root, M.D.
Eduardo A. Salvati, M.D.
L. Ramsay Straub, M.D.
Associate Attending Surgeons
Walter H. O. Bohne, M.D.
Stephen William Burke, M.D.
John P. Lyden, M.D.
Peter J. Marchisello, M.D.
Ralph C. Marcove, M.D.
Thomas P. Sculco, M.D.
Russell F. Warren, M.D.
Assistant Attending Surgeons
Charles Cornell, M.D.
John H. Healey, M.D.
Norman A. Johanson, M.D.
Richard McCormack Jr., M.D.
Jeanne R. Pamilla, M.D.
Paul M. Pellicci, M.D.
Kosta P. Velis, M.D.
Thomas L. Wickiewicz, M.D.
Russell E. Windsor, M.D.

Graduate Staff

Surgeons
David W. Altchek, M.D.
David H. Angel, M.D.
William W. Bohn, M.D.
Roberta Brockman, M.D.
Frank P. Cammisa Jr., M.D.
Jeffrey P. Cella, M.D.
Marc A. Cohen, M.D.
Ronald S. Dubin, M.D.
Mark P. Figgie, M.D.
Marc D. Fuchs, M.D.
J. Andrew Hallberg, M.D.
Stuart C. Kozinn, M.D.
Eugene S. Krauss, M.D.
Rafael A. Lopez, M.D.
Jessop M. McDonnell, M.D.
David G. Mohler, M.D.
George F. Muschler, M.D.
Stephen J. O'Brien, M.D.
Evan Schwartz, M.D.
Walter K. Urs M.D.
Assistant Surgeons
Walter B. Beaver, M.D.
Mark K. Bowen, M.D.
Robert L. Buly, M.D.
Daniel D. Buss, M.D.
Steven B. Haas, M.D.
Serena Shaw Hu, M.D.
Allan E. Inglis Jr., M.D.
Scott G. Kantor, M.D.
Robert C. Klapper, M.D.
Kenneth J. Kress M.D.
Robert Marchand, M.D.
Michael J. Maynard, M.D.
Drew V. Miller, M.D.
Michael C. Moran, M.D.
Douglas E. Padgett, M.D.
Nicholas A. Sgaglione, M.D.
Harvey E. Smires Jr., M.D.
Judith W. Smith, M.D.
Samuel J. Snyder, M.D.
T. Scott Stanwyck, M.D.
Steven H. Stern, M.D.
Scott W. Wolfe, M.D.
Steven B. Zelicof, M.D.

Plastic Surgery
Medical Staff

Attending Surgeon-in-Charge
Dicran Goulian, M.D.
Associate Attending Surgeons
Randolph H. Guthrie Jr., M.D.
James W. Smith, M.D.
Assistant Attending Surgeons
Robert L. Cucin Jr., M.D.
Joseph Feinberg, M.D.
Gerald Imber, M.D.
Thomas C. McLure III, M.D.
Kenneth O. Rothaus, M.D.
Robert G. Schwager, M.D.
B. Donald Sklansky, M.D.
Clinical Affiliates
Danica Kovachev, M.D.
Edward W. Powers, M.D.

Graduate Staff

Assistant Surgeons
Darrick E. Antell, M.D.
Joseph B. O'Connell, M.D.
Marcia V. Ormsby, M.D.
Malcolm Z. Roth, M.D.
Neal Sakwa, M.D.
Eric Slone, M.D.

Urology
Medical Staff

Attending Surgeon-in-Charge
E. Darracott Vaughan Jr. M.D.
Attending Surgeons
William R. Fair, M.D.
John G. Keuhnelian, M.D.
Russell W. Lavengood Jr., M.D.
John H. McGovern, M.D.
Edward C. Muecke, M.D.
Willet F. Whitmore Jr., M.D.
John J. Williams, M.D.
Associate Attending Surgeons
John W. Coleman, M.D.
Harry W. Herr, M.D.
David T. Mininberg, M.D.
W. Reid Pitts Jr. M.D.
Jon M. Reckler, M.D.
Robert A. Riehle Jr., M.D.
Assistant Attending Surgeons
Felix L. Badillo, M.D.
Neil H. Bander, M.D.
John D. Birkhott, M.D.
John A. Fracchia, M.D.
Marc Goldstein, M.D.
Urbano K. Guarin, M.D.
Nachum M. Katlowitz, M.D.
Kenneth R. Kurz, M.D.
James P. McCarron Jr. M.D.
Thomas P. McGovern, M.D.
Piero O. Niceta, M.D.
R. Ernest Sosa, M.D.

Clinical Affiliates
John C. Byrne, M.D.
Robert S. Waldbaum, M.D.

Graduate Staff

Clinical Fellows
Brett C. Mellinger, M.D.
William J. Somers, M.D.
Surgeons
H. Ballentine Carter, M.D.
Harold I. Genvert, M.D.
Assistant Surgeons
Kenneth J. Bregg, M.D.
Jean-Francois Eid, M.D.
Bruce R. Gilbert, M.D.
Jeffrey I. Gorelick, M.D.
Marcus H. H. Loo, M.D.
Neal D. Shore, M.D.

Directors of Laboratories

CLINICAL BIOCHEMISTRY LABORATORIES

Biochemist-in-Chief
Alton Meister, M.D.

Clinical Biochemistry

Director
Gordon F. Fairclough, Jr., Ph.D.
Assistant Director
Edward Schubert, Ph.D.
Consultant in Clinical Biochemistry
James Cornell, Ph.D.

CLINICAL PATHOLOGY LABORATORIES

Pathologist-in-Chief
John T. Ellis, M.D.
Laboratory Manager
Marvin Tessler, Ph.D.

Blood Bank and Transfusion Service

Director
Carl F. W. Wolf, M.D.
Assistant Director
Annie M. Strupp, M.D.

Clinical Hematology

Director
Carl G. Becker, M.D.
Associate Director
Adolfo Firpo-Betancourt, M.D.

Clinical Microbiology

Director
Laurence B. Senterfit, Sc.D.

Cytogenetics

Director
M. Lita Alonso, M.D.

Cytology

Director
Charles A. Santos-Buch, M.D.
Assistant Director
June H. Koizumi, M.D.

Surgical Pathology

Director
C. Richard Minick, M.D.
Associate Director
Janet A. Mouradian, M.D.
Assistant Director
Elmer E. Kramer, M.D.

Clinical Laboratory Computer Services

Director
Jerald D. Gass, Ph.D.

CLINICAL DIAGNOSTIC LABORATORIES, DIRECTORS

Basal Metabolism
David V. Becker, M.D.

Cardiac Catheterization, Adult
Jeffrey Borer, M.D.

Cardiac Catheterization, Pediatrics
Aaron R. Levin, M.D.

Cardiac Graphics, Adult
Paul D. Kligfield, M.D.

Cardiac Graphics, Pediatrics
Kathryn H. Ehlers, M.D.

Electroencephalography
Gail E. Solomon, M.D.

Neurophysiology
Jonathan Victor, M.D., Ph.D.

Nuclear Medicine
David V. Becker, M.D.

Pediatric Exercise
Michael S. Snyder, M.D.

Pulmonary Function
Thomas K. C. King, M.D.
James P. Smith Jr., M.D.

Apothecary-in-Chief
W. James Bicket, M.S.

Division of Nursing

Senior Administrative Staff
Senior Associate Director for Nursing
Helen Van Shea, M.A., R.N.
Director of Nursing Practice
Janet McBride, M.A., R.N.
Director of Nursing Administration
Linda Pfingsten, M.S., R.N.
Director of Educational Programs
Louise S. Hazeltine, M.A., R.N.
Directors
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Operating Room/Recovery Room
Marie Frohman, R.N.
Ambulatory Care Nursing
Karen Kirschner, M.S., R.N.
Medical and Surgical Nursing
Kenneth Larson, M.A., R.N.
Psychiatric Nursing, Payne Whitney Clinic
Patricia Massi, M.A., R.N.
Emergency and Critical Care Specialties
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Deaths

We record with sorrow the passing during 1986 of the following members of the center's professional staff and faculty:
E. Lovell Becker, M.D. *Attending Physician*
Robert L. Clarke, M.D. *Associate Attending Surgeon*
Socrates Constantinou, M.D. *Assistant Attending Psychiatrist*
C. Pinckney Deal Jr., M.D. *Assistant Attending Physician*
Robert C. Garrett, M.D. *Assistant Attending Physician*
Francis D. Kane, M.D. *Associate Attending Psychiatrist*
Daniel A. Nachshen, Ph.D. *Assistant Professor of Physiology*
Virginia E. Pomeranz, M.D. *Associate Attending Pediatrician*
Edwin R. Ranzenhofer, M.D. *Associate Attending Psychiatrist*
Bernard Rogoff, M.D. *Emeritus Staff (Medicine)*
Maurice A. Shinefield, M.D. *Assistant Attending Pediatrician*

A Gift to the New York Hospital—Cornell Medical Center

For the Guidance of Your Attorney

Gifts and bequests are an important source of funding for the New York Hospital-Cornell Medical Center. A gift to the New York Hospital-Cornell Medical Center gives aid to the ill and the distressed, supports programs that educate doctors for the future, and makes possible research to stamp out disease, helping people today and generations yet unborn.

The medical center encourages gifts without restriction so as to permit greater facility in planning and administering its extensive and complex programs of patient care, medical education and research.

If a bequest is made to the medical center, the language may be, "I give and bequeath to The New York Hospital-Cornell Medical Center Fund Inc. the sum of $ _____."

Gifts may be made in a number of ways, such as by money (check or cash), by securities, by testamentary devise (land) or by intervivos or testamentary trust.

Because the institutions constituting the New York Hospital-Cornell Medical Center are voluntary, nonprofit institutions (the New York Hospital and Cornell University Medical College) contributing to the public welfare, gifts to the medical center by individuals or corporations are exempt from income, gift and inheritance taxes to the extent and in the manner provided by federal and state laws.

An estate affairs program has been established at the medical center. The program complements its traditional sources of philanthropic support by offering deferred-giving opportunities through charitable trusts that can benefit donors as well as the medical center.

The Society of the New York Hospital, which maintains the New York Hospital, is a corporation created by Royal Charter granted by King George III of England in 1771. The suggested terminology for an unrestricted devise or bequest to or for its benefit is: "I give, devise and bequeath to The Society of the New York Hospital Fund, Inc., a corporation created under the New York State Not-for-Profit Corporation Law and located in New York City, New York...(description of the property) to be used for the general corporate purposes of The Society of the New York Hospital as its board of directors should determine."

If a bequest is made to the medical college, the language may be: "I give and bequeath to Cornell University the sum of $_____ for use in connection with its Medical College in New York City."

If it is desired that a gift or bequest shall be used in whole or in part for any specific purpose in connection with the hospital, medical college or medical center, such use may be specified.

Further information about making a gift to the hospital may be obtained from the Office of the Secretary, The Society of the New York Hospital, 525 East 68th Street, N.Y., N.Y. 10021 (212-472-5645). Further information about making a gift or bequest to the medical college may be obtained from the Secretary of the Cornell University Medical College, 1300 York Avenue, Room F-100, N.Y., N.Y. 10021 (212-472-8397).

Inquiries about gifts to the Medical Center Fund Inc. can be directed to either of the above or to Nancy Walker, Director of Development, 525 East 68th Street, New York, New York 10021 (212-472-6704).

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525 East 68th Street New York, N.Y. 10021

The New York Hospital-Cornell Medical Center

Annual Report 1987

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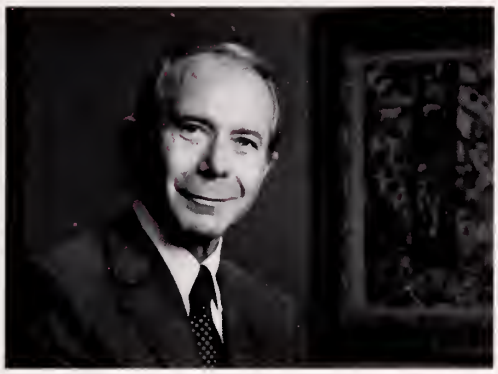
Cover: Nurse and child in New York Hospital's pediatric intensive care unit.
Story, page 7.

Board of Governors



The New York Hospital is dedicated to the best in patient care. During 1987 much was accomplished to assure the perpetuation of this great tradition.

A major step was the selection of Dr. David Skinner as president and chief executive officer. Dr. Skinner succeeds Dr. David Thompson, who retired as director of the hospital after 20 years of able leadership. In establishing the new position of president and chief executive officer, the board responded to the need for consolidated executive authority at a time of rapid change and growing complexity in health-care delivery.

The substantial operating loss in 1987 suggests the dimensions of the challenge facing Dr. Skinner and the hospital's senior administrative staff. The new chief operating officer in this effort is Mr. George Vecchione, who served for 12 years with distinction as president of the New Rochelle Hospital Medical Center and whose background is particularly strong in health-care finance. Newly appointed as senior vice president and chief financial officer is Mr. Edward Burke, a former financial vice president of New York City's Health and Hospitals Corporation. Mr. Burke will spearhead the modernization program so vital to the hospital's future.

The hospital passed a milestone in this effort with the completion last year of the 36-story Helmsley Medical Tower—but much remains to be done to replace a physical plant now more than 50 years old. As we look ahead to further progress, we have meanwhile taken steps to improve our current facilities by replacing more than 700 patient beds and installing new furniture in patient rooms.

Another top priority during the past year was the inauguration of a greatly expanded quality-assurance program and the formation of a board committee on quality assurance chaired by Ms. Charlotte Ford. Maintaining the highest quality of care is an absolute imperative as the hospital adjusts to new modes of third-party reimbursement.

The major initiatives and accomplishments of 1987 reflect the dedicated leadership of Mr. Robert Hatfield, who retired as chairman of the board of governors on December 31. Mr. Hatfield led the board through seven years of sustained achievement that included major new construction and the largest fundraising effort ever undertaken by an academic medical center. The successful completion of this $300 million campaign right on schedule last year testifies to the outstanding leadership of Mr. Hatfield and of the campaign's co-chairmen, Eleanor Elliott and Jansen Noyes Jr.

On a sad note, Dr. Melville Platt, who had recently retired as the hospital's deputy director, died on February 15, 1988. His warmth, wisdom, and sense of humor will be greatly missed.

In this time of transition, the hospital's 6,000 employees have carried on with remarkable dedication. On behalf of the board, let me express appreciation for these efforts.

M.R. Greenberg

Maurice R. Greenberg
Chairman, Board of Governors
The Society of the New York Hospital

Board of Overseers

Frank H. T. Rhodes

Richard F. Tucker

For Cornell University Medical College, 1987 was an extraordinarily eventful year.

Dr. Thomas H. Meikle Jr., dean of the medical college, left to assume the presidency of the Josiah Macy Jr. Foundation. During his seven years as dean, Dr. Meikle presided over a major strengthening of the scientific programs of the medical college, particularly of its basic science departments. This success reflected not only his fervent commitment to biomedical science, but his great skill in maintaining fiscal stability and in attracting financial support to the college. The presidency of the Macy Foundation provides Dr. Meikle with a rare opportunity to extend the scientific and educational legacy he built at Cornell, and we wish him well.

The college is fortunate to have, in Dr. G. Thomas Shires, an outstanding successor to Dr. Meikle. Chairman of CUMC's department of surgery since 1975, Dr. Shires is a figure of special eminence in American medicine, whose extraordinary contributions to burn and trauma care have been recognized over and over again by his colleagues. In fact, three years ago an analysis of surgical leadership published in the *American Journal of Surgery* identified Dr. Shires as the most important leader in American surgery of the past 40 years.

Serving as senior associate deans are Dr. Daniel R. Alonso and Mr. Philip V. Giuca. Dr. Alonso, a professor of pathology, has distinguished himself as a teacher, scientist, and administrator since joining the faculty in 1975. Mr. Giuca has been chief financial officer during a period of growing fiscal strength for the medical college.

As work proceeds on the William and Mildred Lasdon Biomedical Research Center, the college looks ahead to occupancy of this 11-story building early next year. Made possible by a leadership gift from Mildred Lasdon and the late William Lasdon, this building will play a key role in assuring New York Hospital-Cornell Medical Center's continuing scientific leadership.

The Lasdon Center is one of the more visible outcomes of the unprecedented $300 million campaign undertaken in 1982 on behalf of the medical center. Its successful culmination is a tribute to the dedication and leadership of the campaign co-chairmen—Eleanor Elliott, a governor of the Society of the New York Hospital, and Jansen Noyes Jr., former chairman of the board of trustees of Cornell University and a life overseer of the medical college.

Also instrumental in this success was Mr. Robert Hatfield, a former Cornell trustee who served from 1981 through 1987 as president and chairman of the Society of the New York Hospital. The growing partnership of these two institutions is a major legacy of these years, and we look forward to further growth ahead.

Frank Rhodes

Frank H.T. Rhodes
President,
Cornell University

Richard F. Tucker

Richard F. Tucker
Chairman,
Board of Overseers
Cornell University Medical College

For me, the New York Hospital-Cornell Medical Center has always stood first and foremost for the best in clinical medicine."

The words belong to Dr. Anthony Fauci, who was a medical student and resident at the medical center from 1962 to 1968 then returned in 1971-72 as chief resident in medicine. Today, as director of the National Institute of Allergy and Infectious Diseases, he coordinates the entire $250 million AIDS research effort of the National Institutes of Health.

Dr. Fauci is one of many physicians who have trained at Cornell University Medical College and the New York Hospital and gone on to positions of leadership in American medicine. Prominent among them as well is Dr. C. Everett Koop, surgeon general of the United States, who graduated from the medical college in 1941 and will receive its distinguished alumnus award on commencement day, 1988.

What stood out most to Dr. Fauci about the medical center, he recalled last year, was the sense that "great medicine was practiced here." Many others would agree—physicians, nurses, and patients alike. Perhaps no medical center better exemplifies than this one the conjunction of clinical striving and of dedication to the individual that makes for the best in patient care.

The selection last year of Dr. David B. Skinner as president of the hospital and of Dr. G. Tom Shires as dean of the medical college—both preeminent figures in American medicine—inaugurates a new phase of a splendid tradition. The following pages chronicle some of the many people and programs that foster the best in patient care as this new era begins.

Patient Care

In May 1986 Dr. David Skinner, the Dallas B. Phemister Professor of Surgery and chairman of the department of surgery at the University of Chicago Pritzker School of Medicine, delivered the presidential address of the Chicago Surgical Society. The form of the address was somewhat unusual: Dr. Skinner's daughter, Linda, would shortly be graduating from the Johns Hopkins University School of Medicine, and the speech was framed as a letter to Linda.

"The primary and only *important* reason to be a physician," he told his daughter, "is the same now as it has always been over the millennia: one of the highest callings mankind recognizes, the caring for another human in distress using the resources available to the best of your ability. . .

"The primary moral contract, regardless of who pays, is between the doctor and the patient."

In assuming the presidency of the New York Hospital a little over a year later, Dr. Skinner has accepted the challenge of maintaining the primacy of that moral relationship at a time when hospital care is both increasingly competitive and increasingly regulated. It is an era in which physicians are commonly called "providers" and patients "consumers," in which pressures for cost constraint are unrelenting, in which the hand of government intrudes to an unprecedented degree in hospital care.

"What makes the New York Hospital special," Dr. Skinner said recently, "is the way it has always stood for the best in patient care. The greatest skill, yes, but something more—a particular dedication to the patient. The challenge today is to maintain this tradition in an increasingly complex environment."

A major element of that complexity is the growing role of government in monitoring and regulating care. In response to an upsurge of malpractice litigation statewide, New York State has mandated that every hospital implement a quality-assurance program. In addition, the state department of health has taken upon itself the considerable task of overseeing the operation of these programs.

"Having a formal apparatus for quality assurance is nothing new at the New York Hospital or at many other hospitals," Dr. Skinner observes. "What the state has done is not only to make such programs mandatory but to assure their stature by requiring direct involvement of at least one member of the hospital's governing authority. At the New York Hospital we've gone considerably further than that. The primary responsibility for the quality of care in this institution must remain where it has always been, with the board, leadership, and staff of this hospital; therefore, it is imperative that our quality-assurance system go well beyond what is required by the state."

Established in October, the hospital's new quality-assurance committee includes five board members—plus the chairman of the board of governors and president of the hospital—as well as the dean of Cornell University Medical College, the president of the medical board, and the vice president for nursing. Meeting as often as necessary, but no fewer than six times a year, and reporting to the board of governors no fewer than four times a year, the committee oversees all care provided by the medical and nursing staff and by any other health-care personnel employed by or associated with the hospital. The committee interacts with the hospital medical board and with two quality-assurance subcommittees—one consisting of representatives of all clinical departments and the other of senior hospital administrators.

> "The primary moral contract, regardless of who pays, is between the doctor and the patient."

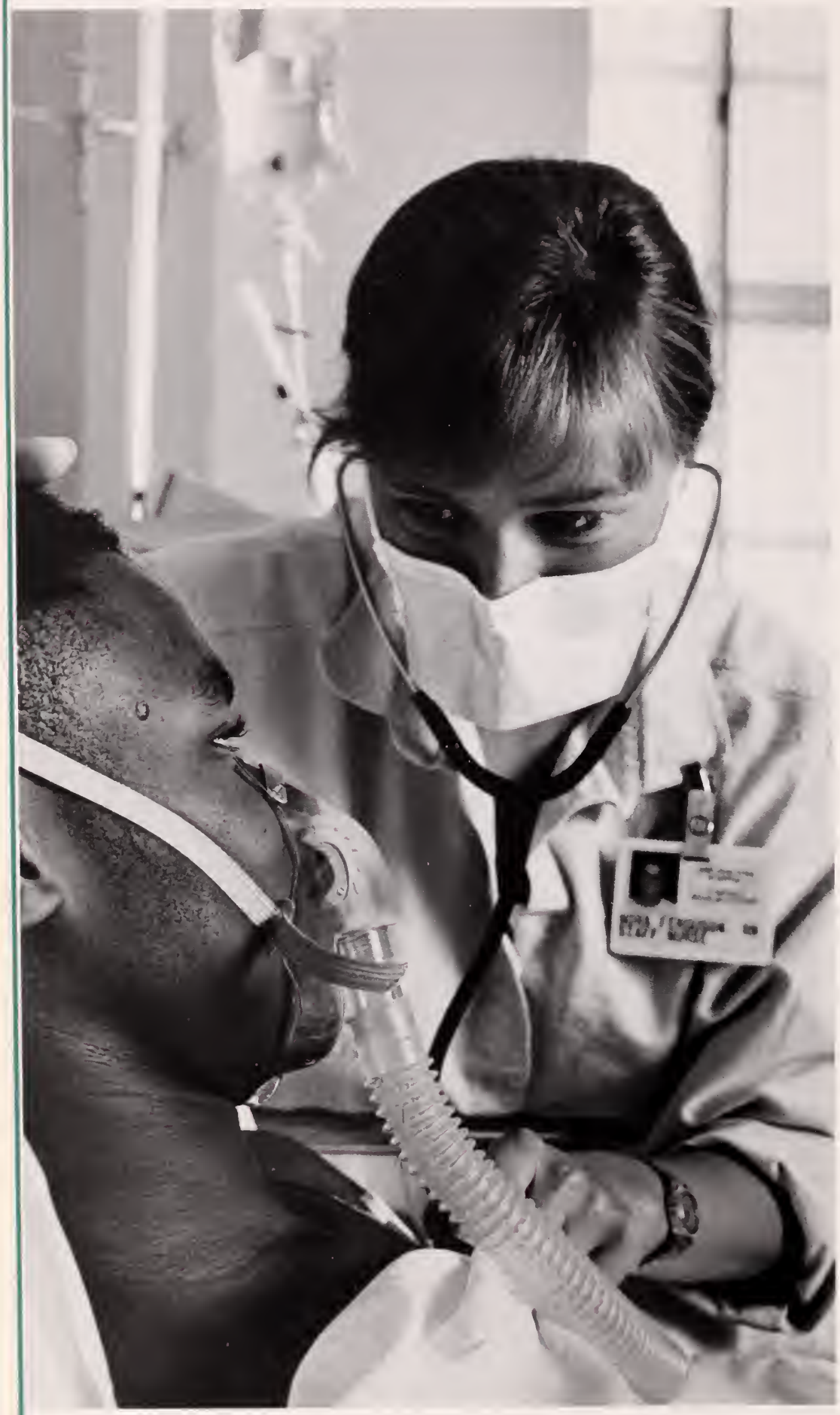
"Obviously, setting up a system of this size is a considerable undertaking," Dr. Skinner says. "This can readily be seen in the fact that the quality-assurance committee met 11 times in the first two months of its existence. But hospitals have become extraordinarily complex, and the system we put in place has to be equal to the task of dealing with that complexity.

"The system also reflects the fact that there is less margin for error in hospital care than there used to be. Because of constraints on lengths of stay, our average patient today is sicker than the average patient of five or ten years ago. He or she is also older, meaning that patients are more likely to have multiple disorders and to be less resilient. A quality-assurance system has to be comprehensive enough to enable us not only to deal with problem situations but to assess the day-to-day quality of care and thereby prevent serious problems from arising in the first place."

To a considerable degree, the complexity of hospital care today derives from the growing array of choices presented by modern medicine. "The great majority of operations done in leading hospitals today were either unknown or not feasible around 1960, when I was an intern," Dr. Skinner says. "Not only are many more conditions treatable, but very often there are several ways to treat a particular disorder—for example, radiotherapy as an alternative to surgery in the treatment of some cancers. We have therefore initiated intensive efforts, under the leadership of Dr. Jerome DeCosse, an attending surgeon, to strengthen professional interactions across specialty boundaries in clinical management of cancer patients. Efforts will also be directed to geriatric and heart patients and will include a major effort to develop prevention programs for patients at risk for heart disease and cancer."

"What have particularly impressed me since my arrival here," Dr. Skinner concludes, "are the letters from grateful patients that come every day. A high level of dedication to patients must always prevail at the New York Hospital, even as changes in medical care and public expectations require new approaches. Professionalism, compassion, and an unremitting quest for knowledge were the ideals that gave birth to this institution in the 18th century, and our task is to assure that they are alive and well here in the 21st."

Dr. David Skinner, president of the New York Hospital, stops to chat with a patient on Payson-3. What makes the hospital special, he says, "is the way it has always stood for the best in patient care. The greatest skill, yes, but something more—a particular dedication to the patient."



Staff nurse Nora Ferguson checks the heartbeat of a patient in the pediatric intensive care unit, one of 13 critical care facilities of the New York Hospital. The hospital's total of 177 intensive beds is almost 50 percent higher than it was in 1980.

Intensive Care

Fifteen-year-old Ibrahim Quraishi had been a sick child from birth. In his young lifetime, no year had ever passed without a bout or several bouts of pneumonia, and, even when not hospitalized or confined to bed, he was constantly wheezing and short of breath. For a while, doctors ascribed his problems to allergies, but in 1987 a nuclear radiological exam disclosed that Ibrahim had bronchiectasis, a permanent respiratory problem caused by chronic infection.

The only cure for Ibrahim's condition is removal of part of the affected lung, a hazardous procedure that Ibrahim was nevertheless determined to undergo. On February 23, 1988, he was operated on at the New York Hospital by Dr. Jeffrey Gold, an assistant attending cardiothoracic surgeon.

Like other patients who undergo major surgery at the New York Hospital, Ibrahim Quraishi found himself at the conjunction of an extraordinary range of skills and technology. For nine days after his four-hour operation, he was a patient in the hospital's pediatric intensive care unit, where a ventilator did his breathing for him and where temperature, blood pressure, pulse, and an array of other vital functions were monitored continuously.

The 700 desperately ill children admitted each year to this unit—more than one third of them transfers from other hospitals—are cared for round the clock by a staff of 44 nurses, with a minimum of three physicians always in attendance.

Ibrahim's memories of the first few days after the operation are fragmentary. There were pain and thirst, the discomfort of being hooked up to so many lines, a strangeness in being the passive object of so much attention. But, through it all, there was the consciousness of people who were very caring, who joked with him, who attended him with a dedication that he found amazing.

"The technology of these units is very impressive and becoming more so," says Dr. Gold. "For example, two or three years ago the only way to get a reading of the oxygen level in a child's blood was to draw a sample and send it to the lab. Today we simply clip to a finger or toe a tiny device that pulses infrared light through the skin and gives us a continuous reading of blood oxygen. Or take the new monitors currently being installed in all intensive care units in the hospital: they not only display more functions than the old monitors but interface with computers to provide a whole new dimension of data.

"But useful though the data certainly is," Dr. Gold adds, "quality intensive care is less a matter of technology than of the people using it."

In the case of the NYH-CMC pediatric intensive care unit, that means attendings who are board-certified specialists in critical care pediatrics; it means clinical fellows who have completed pediatric residencies and are training as critical care specialists; it means a talented group of pediatric residents; and it means nurses with special expertise in caring for gravely ill children.

> "The technology of these units is very impressive. But quality intensive care is less a matter of technology than of the people using it."

The pediatric intensive care unit is one of 13 critical care units in the New York Hospital, a group comprising some of the world's best medical, surgical, neurological, and neonatal facilities. The hospital's total of 177 intensive beds is almost 50 percent higher than it was in 1980, and will likely continue to rise with further advances in the science and practice of medicine. Such is the demand for care in the pediatric intensive care unit that the number of beds will be increased from 12 to 18 during the coming year, according to the unit chief, Dr. Daniel Notterman.

As important as the expertise of the staff, Dr. Notterman believes, is the high degree of coordination among them, particularly the interaction between physicians and nurses. "Nurses care for the patients minute by minute; it is crucial that they communicate to doctors what they are seeing and that doctors share with them the goals and rationale of treatments. The nursing staff participates fully in daily rounds, and nurses and fellows meet several times a week to discuss the progress of individual cases."

A recent article in the journal *Annals of Internal Medicine* found that, when different intensive care units are compared, patient outcomes correlate more strongly with coordination of care than with any other factor. Adds Dr. Notterman: "No one picks up faster on inconsistency and confusion than patients. When Ibrahim Quraishi credits us with care and dedication, he pays us a very big compliment indeed."

On March 4, ten days after a difficult and perilous operation, Ibrahim was discharged from the New York Hospital. Able to breathe freely for the first time in his life, he plans to start college next fall.

Nursing

The patient was sitting up in bed reading the newspaper and feeling perfectly fine, so he was a little surprised to look up and find himself surrounded by nurses and doctors. Unknown to him, his heart was racing at 150 beats per minute, in an episode known as sustained ventricular tachycardia. A nurse watching a screen at the unit nursing station had seen the episode develop and summoned help. One of the responding physicians quickly administered a medication to the patient, and his heart rate returned to normal.

What averted cardiac arrest and possible death in this instance was a telemetry system that provides continuous electrocardiographic monitoring. Inaugurated in 1986 through the generosity of the Rosenfeld Heart Foundation, the system has been so successful that it is about to be expanded from eight beds to 28 beds on the third floor of the Whitney Pavilion. In addition, some 50 beds will be covered by telemetry on the surgical floors devoted to cardiothoracic-surgery patients.

"Many of the patients in our unit have suffered heart attacks and come to us from the coronary intensive care unit," says Debra Hollenberg, head nurse on Whitney-3. "Or they may simply be people with symptoms of cardiac abnormalities. In any event, they are patients whose heart functions need to be closely monitored but who are ambulatory and do not require the level of care provided in an intensive care or critical care unit.

"Previously we might have used portable bedside monitors with these patients. But to read a portable monitor, a nurse has to be in the room with the patient, whereas now she can monitor eight patients at once from the nursing station."

Each telemetry patient wears ECG electrodes attached to his or her chest and connected to a small portable transmitter. Antennae strategically installed in the ceiling pick up signals from the transmitter and relay them to a computer that analyzes the data, picks out any irregularities, and transmits a record of them to a screen monitored 24 hours a day. When the abnormalities exceed a threshold, the computer signals an alarm by ordering a machine at the nursing station to print out an ECG record of the anomalous beats.

"Essentially, it is the nurses who make the system work," says Karen Kirschner, the hospital's director of medical nursing. "It is up to them to judge whether the computer is picking up real problems or merely reacting to the patient's brushing his teeth."

Explains Mrs. Hollenberg, "The computer knows virtually everything about heartbeats but not a lot about people, so that it can produce false positives that merely reflect a change in what the patient is doing. It is up to the nurses to review printouts and decide whether they contain significant data (in which case they are stored for the patient's physician) or whether they constitute a false alarm. Naturally, if the data suggests some imminent danger, it is up to the nurse to initiate action."

All 23 nurses on the unit take turns viewing the monitor, a half hour at a time, and nine nurses will be added when all the unit's 28 beds are telemetrized within the next few months. Each nurse must pass a two-week course in arrhythmias and ECG recognition.

"Essentially, it is the nurses who make the system work. It is up to them to judge whether the computer is picking up real problems or merely reacting to the patient's brushing his teeth."

"Nurses also devote a lot of time to patient education," Mrs. Hollenberg adds. "There is a lot for patients to know about medications, diet, and physical activity, and nurses assume a major responsibility for teaching them. Later this year, when the number of telemetry beds is increased, we expect to formalize the educational program, offering classes two or three times a week for groups of patients."

A striking feature of the unit is the enthusiasm of the nurses, which Mrs. Hollenberg attributes, in large part, to the satisfactions that derive from developing expertise in a particular specialty. Ms. Kirschner agrees.

"Specialization is proceeding as fast among nurses as among physicians," she says. "As medicine and technology become more complex, we are called upon to develop more and more high-level, specialized skills. While generalist nurses will always be needed, just as generalist physicians will be, specialization becomes a career option and helps retain nurses in the hospital and at the bedside. The success of the telemetry unit suggests this will be a boon not only for medicine but for nurses as well."

Violet Samuels, a staff nurse on Whitney-3, keeps watch at the unit's telemetry system, which provides continuous electrocardiographic monitoring of eight patients. Installed in 1986, the system has been so successful that it will shortly be expanded to 28 beds on Whitney-3 and to 50 beds on the surgical floors devoted to cardiothoracic patients.

Support Services

When James Miller was in the 101st Airborne Division in the early 1960s, they were called white-glove inspections. Today, without the benefit of white gloves, Mr. Miller conducts them several times a week. Appointed dayshift manager of the NYH housekeeping department a year ago, after close to 30 years on staff, Mr. Miller bears a major responsibility for the cleanliness of nearly 2 million square feet of space in the hospital and medical college.

Daunting though that job may be, Mr. Miller gets a lot of help: the staff of housekeeping has increased from 225 to 300 workers since 1985. Although part of that increase reflects the department's assumption of responsibility for the medical college and for newly constructed hospital areas, about 20 percent provides increased manpower for the main hospital building.

Help has also come in the form of a $4.3 million investment—principally from the Starr Foundation—in new furniture for the hospital. In late 1987 and early 1988, new beds were installed in all rooms of the main building, with the exception of intensive care units and infant areas. In addition, drawers, cabinets, chairs, and other room furniture were replaced.

"All patient rooms have to be cleaned once a day, including mopping, dusting, and garbage removal," Mr. Miller says. "We have 23 housekeeping teams, each responsible for a particular part of the medical center, and I get around to every one at least once a month with a detailed checklist. Each quarter we give an award to the team that has compiled the best record, and at the end of the year we honor the best overall team with a dinner. We have a fine group of people, some of whom have actually been here longer than I have, hard as that is to believe. They work hard and have good attitudes, and with the new furniture and staff, morale is high."

Fred Macri, the hospital's vice president for general services, agrees. As a native upstate New Yorker who still finds himself shocked at the cavalier attitudes toward littering he finds in the city, Mr. Macri views cleanliness as a difficult battle that is, nevertheless, being won. He also points to several other developments that are creating a better hospital environment and more cost-effective services.

"Two years ago we spent about $600,000 on replacing linen," he says. "Last year we spent $450,000, a 25 percent saving that resulted from new procedures for handling this hospital's 6 million pounds of laundry. Not only have we saved money but more linen is in circulation at any given time, meaning that we're not going to run short of hospital gowns or towels.

"Another gain has been in more timely transport of patients, a service carried out by the 62 people in our escort service. Previously a significant amount of time was lost because escorts had to rely on telephones to get their next assignment, and phones were frequently tied up. Now we are using radio walkie-talkies to bypass the telephone system. The result: less waiting by the patients and a 15 percent improvement in productivity."

The telephone system itself is a major priority: the medical center will shortly begin installing its own system, a development that will save an average of $1 million a year over the next 10 years. Also in the works is a local-area-network wiring system for computer telecommunications and data transmission, a system to speed communication of test orders and test results among laboratories, physicians, and nurses.

When James Miller was in the 101st Airborne Division, they were called white-glove inspections. Today, without the benefit of white gloves, Mr. Miller conducts them several times a week.

Finally, the hospital's food continues to be a top priority.

"When this medical center opened its doors in 1932, the staff included the chef of the Hotel Pierre," says Angelo Gagliano, the hospital's director of food and nutrition services. "We remain committed to an equally high standard in 1988."

Mr. Gagliano joined the hospital two years ago, after three years as corporate director of food services for the Ford Motor Company and an earlier 18-year stint as director of food services at Memorial Sloan-Kettering Cancer Center. He recently hired Charles Julian, an executive chef of the Marriott Corporation, as the hospital's executive chef and is looking forward to a major renovation of the hospital's main kitchen in 1988.

Says Mr. Gagliano: "Our new kitchen, combined with dedicated elevators to move food upstairs quickly, will insure that all patients get food that is both freshly cooked and hot. We're also adjusting our menus to reflect contemporary tastes for lighter foods. Food service is a bright spot in the patient's day. Some patients tell us that they eat better at the hospital than at home, and our aim is to hear more and more of that."

James Miller checks for dust in a room prepared for a new patient. The hospital's housekeeping staff has recently been increased, and new beds and furniture have been installed in patient rooms.

Emergency Care

"Ten or fifteen years ago the emergency rooms of many hospitals were staffed by physicians with no special interest or skills in emergency care. Today it is widely recognized that emergency patients do best in units where a cadre of physicians and nurses devote themselves full-time to emergency medicine."

The speaker is Dr. Joseph McAuley, director of the NYH-CMC emergency department. A specialist in trauma care, whose background includes extensive experience in city hospitals and in Vietnam, he came to the medical center a year ago from Downstate Medical Center in Brooklyn.

Dr. McAuley sees emergency care as having improved in several major ways.

"First, emergency training in the United States has been generally upgraded," he says. "We now have standard texts for advanced certification in emergency care—for example, one in advanced cardiac life support published by the American Hospital Association, and one in advanced trauma life support published by the American College of Surgeons. Standard protocols are crucial in emergency medicine because the need for fast action leaves little time to think. All residents in medicine and surgery at this medical center are certified in advanced cardiac life support, and the surgical residents get advanced trauma certification as well.

"Second, emergency medicine benefits from new technology and from medical progress in general. Our emergency medics, who answer calls through the city's 911 Emergency Medical Services system, can broadcast patients' vital signs back to us in the emergency room, enabling doctors here to direct care in transit. And, once the patient arrives, we have the backing of tremendous resources from throughout the hospital. As an officially designated trauma center, the New York Hospital is obliged to have surgical trauma teams on five-minute availability status 24 hours a day. For cardiac cases and many other conditions, a wealth of medical expertise and technology is readily available, whether from residents in advanced stages of training or from physicians on the attending staff.

"A third advance, building on the other two, is the increasing role of full-time emergency attendings. Not only do residents get better emergency training, not only are there more hospital resources to draw upon, but we now have a cadre of doctors—five trained in internal medicine and two in surgery—who devote themselves full-time to emergency care. All are young (an advantage, given the demands of the emergency room); most received their residency training at this medical center; all have a particular interest in emergency medicine and a high degree of motivation.

"The last factor is particularly important, because nowhere in a hospital is teamwork more important than in the emergency department. When a serious case comes in, four or five people may be working at once to stabilize the patient—attendings and nurses and residents and technicians—and everybody has to know what everybody else is doing without wasting a lot of words. The primary responsibility for fostering that kind of teamwork rests with our full-time attendings and senior nurses, and they have done a fine job at it."

> "Nowhere in a hospital is teamwork more important than in the emergency department."

In addition to the recruitment of a full-time medical staff, the emergency department has had two other major developments during the past year. One is the beginning of an extensive renovation of the facilities, made possible by a generous gift from Mr. John Weinberg and scheduled to be completed by the middle of 1988. The second is the opening of a new service for urgent, but non-emergency, cases. Located adjacent to the main emergency area and staffed with its own attending physicians and clinical fellows, the UrgentCare Center is open from 8 a.m. to 10 p.m. on weekdays and from noon to 8 p.m. on weekends and holidays.

"Many people use the emergency department for conditions that don't require the instant attention that true emergencies do. A triage nurse determines whether patients fall into this category and directs them to the UrgentCare Center to be seen on a first-referred, first-served basis. The new system averts congestion in the main emergency area and speeds up service for non-emergency patients, who will no longer have to wait while more serious cases are treated."

Concludes Dr. McAuley: "Before this hospital joined the 911 EMS system in 1979, fewer than 10 percent of its patients came through the emergency room. Now close to 20 percent do. We're handling more true emergencies than ever and are better equipped than ever to do so."

A patient has been brought into the emergency department with a drug overdose. Whereas fewer than 10 percent of the hospital's admissions came through the emergency room a decade ago, close to 20 percent do today. Says the department's director, Dr. Joseph McAuley, "We're handling more true emergencies than ever and are better equipped than ever to do so."

Meeting with psychiatric residents are Dr. Stefan Stein, center, director of education of NYH-CMC's Westchester division, and Dr. Richard Munich, right, an associate attending psychiatrist. The department of psychiatry received 505 applications last year for 24 openings in its residency program.

House Staff

A 45-year-old woman forgets to turn off the stove, leaves lit cigarettes around her apartment, misses appointments, and fails to remember important details of her daily routine. When tests at a local hospital reveal no clear basis for her problem, her doctor suspects Alzheimer's disease, and her alarmed family considers admitting her to a nursing home. But, because of her relative youth, her physician refers her for evaluation to NYH-CMC's Westchester division, a 322-bed, full-service psychiatric facility in White Plains.

Soon after admission, the woman is examined by a resident—a young physician training to be a psychiatrist—who does a thorough physical exam and psychological assessment. He notes that, in addition to lacking mental concentration, the woman is withdrawn, has a very negative self-image, feels her family is united against her, and has a generally bleak view of life. Later that day, he meets with his supervisor, a psychiatrist on the attending staff, and suggests that the patient's problem may not be Alzheimer's disease but rather depression. The supervisor questions the resident closely, and the two of them visit the woman briefly in her room. Symptoms of depression sometimes resemble those of dementia, and the supervisor's initial view is that the resident is correct. The resident orders tests and studies to confirm the preliminary diagnosis.

Before a final treatment plan is drawn up, the resident presents his recommendations to a case conference, attended by four or five of his fellow residents and a senior attending psychiatrist, as well as by psychologists, nurses, and social workers. While there is general concurrence with the diagnosis, it is decided that, because of the possibility of dementia, the patient should be examined by a fellow in neuropsychology. That examination also confirms the diagnosis. The case having now been reviewed by three senior people within several days, the resident can proceed with the treatment plan that the group has developed.

"Residents are a vital part of this institution," says Dr. Stefan P. Stein, director of education at the Westchester division. "In the course of their psychiatric training, they play an indispensable role in patient care."

In a given year, the medical center's 12 clinical departments provide training for close to 500 house staff, including interns, residents and fellows. Young doctors participate in three or more years of house-staff training. The Westchester division and the smaller Payne Whitney Clinic in Manhattan, the two psychiatric facilities of NYH-CMC, received a total of 505 applications last year for 24 beginning residency slots. Indeed, NYH-CMC residency programs in general are extraordinarily popular: the department of medicine, for example, received 839 applications for 40 internships.

According to Dr. Stein, "It is the junior resident—first or second year—who usually has the closest and most sustained contact with patients, even though a more-senior resident and attending are assigned as well. Having only six patients, the junior resident can give each of them plenty of time and thought. The more-senior people will see the patient at least several times a week—enough to insure that the treatment program is being properly implemented but not so much as to interfere with the spontaneous concern and personal involvement that house staff bring to clinical care. Though inexperienced, these young doctors have had intense exposure to the latest clinical knowledge, and, in a field that is evolving as quickly as psychiatry, this is a great advantage."

> "Clearly the training of residents is vital to the future of medicine. Does it also enhance the care of today's patients? Absolutely."

A treatment plan in modern psychiatric care generally combines several interventions. Medications that produce dramatic progress usually do so in conjunction with other types of treatment, such as psychotherapy, family therapy, group therapy, home visits, and diet and exercise programs. In the case of the depressed woman, the patient is treated with tricyclic antidepressants, in addition to which the resident talks with her daily, meets with her family, and closely monitors her diet and her participation in the activities program.

Within a week the patient is sleeping better, and her appetite has improved. Within two weeks she is no longer experiencing severe lapses in memory and has become considerably more outgoing: she plays cards, talks to her family on the phone, reads, and establishes a good rapport with the resident. Four weeks later, she has recovered enough to be released from the hospital, although she will continue to take medication and receive therapy on an outpatient basis.

"Clearly the training of residents is vital to the future of medicine," says Dr. Stein. "Does it also enhance the care of today's patients? Absolutely. It multiplies the attention patients receive, and not only are young doctors educated but older doctors are kept on their toes. Given the pace of medical progress, the energy, talent, and ideas residents bring to patient care are more important than ever."

Dr. G. Tom Shires, dean of the medical college and chairman of its department of surgery, with Dr. Michael Madden, a clinical assistant professor of surgery, at the entrance to the NYH-CMC burn center. Over 30 research publications emanated from the burn center last year.

Research

Twenty years ago an article appeared in *Annals New York Academy of Sciences* that has since become a landmark in the literature of burn care. Written by Drs. Charles R. Baxter and G. Tom Shires, the article reviewed the authors' experience with a series of 277 severely burned patients who were resuscitated by means of intravenous fluids. The therapy, carefully developed through laboratory and clinical research, employed a much greater volume of fluid than was standard at the time and resulted in significantly lower mortality.

The paper and many others by Dr. Shires and colleagues were part of an impressive body of surgical/biological research that revolutionized the management of severe injuries, including those caused by surgery itself. This revolution has saved the lives of hundreds of thousands of burn and trauma victims—among them many American soldiers in Vietnam, where improved trauma therapies resulted in the lowest ratio of dead to wounded of any war in history. Equally important, this revolution has made possible operations that are now all but taken for granted—for example, open heart surgery, transplantation surgery, and peripheral vascular surgery.

Today, as dean of Cornell University Medical College and chairman of its department of surgery, Dr. Shires surveys a research effort in excess of $50 million. As someone whose career has embraced both biological science and clinical medicine, he is keenly aware of the contributions that research at a major medical center makes to patient care.

Most of these contributions, of course, will be realized in improved care in the future. But there are also important ways, Dr. Shires believes, in which research contributes to patient care here and now.

"For one thing, research attracts to this center physicians with highly developed analytical skills that are at a premium in the treatment of particularly complex or difficult disorders. In many instances patients are referred here after having baffled other doctors, and the process of solving such cases can lead to significant discoveries as surely as work in a laboratory can.

"A second advantage for patients of a strong scientific program is that it attracts the most promising new technologies. In the 1970s, the New York Hospital was one of the first hospitals to have a CT scanner, and in the 1980s it was the first hospital to receive permission from New York State to use magnetic resonance imaging in patient care. The state recognized that MRI was an exciting new way to image the body, but also realized it would take a special breed of scientist—the kind we have at this medical center—to sort out the machine's potential. More recently, the Food and Drug Administration designated this center as one of the first six institutions in the United States to initiate investigational testing and clinical trials of a lithotripter, a machine that pulverizes kidney stones through high-energy shock waves.

"A third advantage—and perhaps the most important—derives from the resources a research center can bring to bear on conditions for which there is no cure. By definition, all research is experimental, its benefits uncertain, and we are obliged to spell that out very clearly to subjects in obtaining their informed consent. But for disorders for which there is no effective standard therapy, the only treatment available *is* experimental, and patients look for help to centers that are in the forefront of clinical research."

A good example is the medical center's $2.5-million-per-year program in AIDS research, which includes extensive trials of promising therapies. One study focuses on gamma interferon, a substance normally made by the immune system but which is deficient in AIDS patients and which is being administered to shore up the ability of these patients to fight infections. Other studies test the effectiveness of antiviral agents, such as ribavirin and AZT. Still others focus on drugs—such as spiramycin and fluconazole—that combat debilitating conditions associated with AIDS. Finally, extensive research is devoted to seeking the most effective ways of counseling AIDS patients or individuals at particular risk for AIDS.

> "In one crucial way, experimental care is indistinguishable from more conventional care. In all instances the physician's first concern is the good of the patient."

Another good example is burn care.

With over 900 inpatients and 3,000 outpatients treated in 1987, NYH-CMC's burn center is the largest such unit in the world. Despite great progress, burns still cause many deaths each year, and research is integral to the center's mission: over 30 publications emanated from this facility last year on subjects that included infection and immune response, smoke inhalation, nutrition, and treatment of wounds.

One exciting line of research entails grafting burn patients with skin specimens that are obtained from donors and then grown in culture. This approach could turn out to be of historic importance, since replacement of burned skin is a major clinical challenge and recipients do not reject the cultured epidermis. An encouraging report, involving 26 patients at the burn center, recently appeared in *The Journal of Trauma*, and, while many questions remain to be answered about this therapy, it continues to be used with selected patients with positive results.

"Some of the research in the burn center inevitably involves the participation of patients," Dr. Shires says. "Outcomes of experimental therapies, agreed to by the patient in advance, are by definition uncertain. But progress is made precisely because unproved but promising protocols *can* turn out to be effective, sometimes surprising learned people in the process.

"And in one crucial way," he concludes, "experimental care is indistinguishable from more conventional care. In all instances the physician's first concern is the good of the patient."

The 36-story Helmsley Medical Tower, completed in 1987.

Year in Review

At 25th anniversary of CRC: from left, Dr. Joseph Gertner, director of CRC children's unit; guest speaker Dr. Anthony Fauci; and Dr. Robert Campbell, director of adult unit.

Professor Eli Ginzberg

Dr. Margaret Hilgartner

Maurice Greenberg and Greenberg Award winner Dr. Victor Marshall

January. The Beatrice and Samuel A. Seaver Laboratory of Cardiopulmonary Research and the Beatrice and Samuel A. Seaver Laboratory of Cancer Immunology were dedicated at CUMC. Guest of honor at the ceremonies was Beatrice Seaver, who, with her late husband, Samuel A. Seaver, donated funds to construct and equip the laboratories.

February. The theme of the third annual Cornell University Medical College Conference on Health Policy was "Medicine and Society: Clinical Decisions and Societal Values." The two-day conference was chaired by Professor Eli Ginzberg of Columbia University. . . NYH-CMC's Clinical Research Center (CRC) celebrated its 25th anniversary with a special symposium. The event gave recognition to the key role the CRC plays in promoting health research at the medical center and featured speakers from NYH-CMC and other medical centers and from the National Institutes of Health, which supports CRCs around the country. . . Dr. Joseph A. McAuley, a trauma specialist, was appointed director of the emergency department at NYH-CMC.

March. "Match Day" brought news of their first-year hospital appointments to members of the CUMC class of 1987. Sixty-five members of the graduating class won appointments to their first-choice hospitals, with 22 receiving appointments at the New York Hospital.

April. At the seventh annual Maurice R. Greenberg Award Dinner, awards for distinguished service were presented to Dr. Victor F. Marshall, first James J. Colt Professor of Urology and former director of the division of urology, and, posthumously, to Dr. Vincent Du Vigneaud, a Nobel laureate in chemistry and former professor and chairman of the department of biochemistry at CUMC. . . In a standing-room-only appearance sponsored by the Heberden Society, Nobel laureate James D. Watson lectured on early research on RNA. . . NYH-CMC's burn center, the nation's largest burn facility and a leader in burn-care treatment, research, and education, celebrated its 10th anniversary. . . Dr. Lawrence Scherr, director of the department of medicine at North Shore University Hospital and the David J. Greene Distinguished Professor of Medicine at Cornell University Medical College, became president of the 63,000-member American College of Physicians. . . Dr. Margaret Hilgartner, director of NYH-CMC's division of pediatric hematology/oncology, was named the first Harold Weill Professor of Pediatric Hematology. The professorship honors the late governor of the New York Hospital who founded the Children's Blood Foundation. . . Dr. David D. Thompson, the director of the New York Hospital, was honored at the annual dinner of the Greater New York Hospital Association for "outstanding leadership in health care administration and lasting contributions to improving the health and welfare of the people of New York City."

May. Vernon E. Jordan Jr., former president of the Urban League and a governor of the New York Hospital, was the featured speaker at Cornell's medical commencement, where

Commencement speaker Vernon Jordan

101 medical degrees and 14 doctorates in medical sciences were bestowed. Dr. Robert Haggerty '49, clinical professor of pediatrics at CUMC and president of the William T. Grant Foundation, was presented with the alumni award of distinction. For the fourth year in succession, Dr. Rudolph Leibel, associate professor of clinical pediatrics, was voted the Elliot Hochstein Teaching Award by the medical college's graduating class. . .The Iris and B. Gerald Cantor Ambulatory Surgery Center, a facility for outpatient surgery, was dedicated at the New York Hospital. . . A fashion show sponsored by the executive committee of NYH-CMC's Lying-In Hospital raised nearly $100,000 to benefit women's health care at the medical center. The event was co-chaired by Pauline Baker Boardman, Iris Cantor, Beatrice Seaver, and Ruth Stanton.

Dr. Edward Crandall

June. Dr. Edward D. Crandall, director of the division of pulmonary and critical care medicine at NYH-CMC, was named the first Bruce P. Webster Professor of Internal Medicine. The professorship was established with a bequest from Dr. Webster's estate and with additional gifts from the late Roy E. Larsen, former vice chairman of Time, Inc. . . Dr. John T. Ellis became the first David D. Thompson Professor of Pathology at the medical college. The professorship was established by the Penzance Foundation and its president, Hays Clark, a governor of the New York Hospital.

Daniel Davison

July. NYH-CMC's department of pulmonary and critical care medicine was awarded the first Israel Steinberg Memorial Fellowship by the Will Rogers Institute. . . Daniel P. Davison, a member of CUMC's board of overseers, succeeded James H. Evans, a governor of the New York Hospital, as chairman of NYH-CMC's advisory board.

Carroll Petrie

August. The UrgentCare Center, a service for non-emergency cases requiring medical attention, was opened at the New York Hospital. Located adjacent to the main emergency area and staffed by its own physicians and nurses, the service is designed to improve care for emergencies and non-emergencies alike.

September. Donald O'Connor and Debbie Reynolds were the headliners at "Cabaret '87!," the fifth annual benefit for the medical center. With hospital governors Walter B. Wriston and Carroll Petrie co-chairing for the third year in succession, the event raised more than $1 million. . . Ralph A. Nappi, president of the board of trustees of North Shore University Hospital and a prominent Long Island lawyer, was elected to the board of overseers of CUMC. . ."How Men Affect Your Health" was the theme of the fifth annual NYH-CMC symposium on women's health . . The medical center's in-vitro fertilization program achieved its first birth.

Mr. and Mrs. Walter Wriston

October. Dr. David B. Skinner, chairman of the department of surgery at the University of Chicago Pritzker School of Medicine, assumed the newly created position of president and chief executive officer of the New York Hospital. Selected after a two-year search, Dr. Skinner succeeded Dr.

Paul Simon announces New York Children's Health Project

Retiring NYH director, Dr. David Thompson, with Mrs. Thompson at staff party in his honor

At benefit for CUMC minority students: from left, Lena McPhatter, Charlayne Hunter-Gault, Evelyn Cunningham, Mrs. and Dr. Aaron Wells, and Dr. Bruce Ballard.

David D. Thompson, who retired after 20 years as the director of the hospital. . . Dr. G. Tom Shires, chairman of the department of surgery and surgeon-in-chief at NYH-CMC, was appointed the Stephen and Suzanne Weiss Dean of Cornell University Medical College. He succeeded Dr. Thomas H. Meikle Jr., who resigned to become president of the Josiah Macy Jr. Foundation. . .The AMA's sixth annual science-reporters' conference, co-sponsored by NYH-CMC, was held at the medical center. Attended by more than 125 science writers and reporters, the two-day conference featured 16 presentations on recent developments in research on AIDS and in neuroscience and other aspects of biomedicine. . .The second annual "Fete de Famille" was held at Mortimer's Restaurant to benefit the AIDS research being conducted by Dr. Jeffrey Laurence, an assistant professor of medicine.

November. Robert A. Burch, vice president for development and public information of Save the Children, an international community development agency, was named executive director for development and public affairs at NYH-CMC. . . Singer/songwriter Paul Simon and Dr. Irwin Redlener, chief of ambulatory pediatrics at NYH-CMC, announced the establishment of the New York Children's Health Project, a program to provide free basic medical services to homeless children living in temporary hotel shelters in New York City. Doctors and nurses from the New York Hospital staff a mobile medical unit that makes scheduled visits to 12 hotel shelters in Manhattan and Queens. . ."Windows on the Mind '87," the third annual benefit for the department of psychiatry raised nearly $100,000.

December. Maurice R. Greenberg was elected chairman of the board of governors of the Society of the New York Hospital, effective January 1, 1988. He succeeds Robert S. Hatfield, who had headed the board since 1981. . .New York Hospital-Cornell Medical Center's five-year capital campaign raised $304 million, some $4 million higher than the targeted goal. Enabling the campaign to surpass its goal were recent donations of $10 million by hospital governor Peter Kalikow; $6 million from the Starr Foundation and its chairman, Maurice R. Greenberg; and $1.5 million from Iris and B. Gerald Cantor. . .The New York Firefighters Burn Center Foundation contributed $100,000 to the NYH-CMC burn center, bringing the foundation's total contributions for 1987 to $150,000. . .At a Plaza Hotel luncheon to benefit the financial aid program for CUMC minority students, Dr. Aaron O. Wells, clinical associate professor of medicine and associate attending physician at NYH-CMC, and Charlayne Hunter-Gault, national correspondent for the MacNeil/Lehrer NewsHour, were presented with the third Roscoe C. Giles Award. Named for the first black graduate of CUMC, the award honors those who have made significant contributions to the minority community or to the field of medicine.

Development Report

Photo: Christian Steiner

Eleanor T. Elliott,
campaign co-chairman

Jansen Noyes Jr.,
campaign co-chairman

Robert A. Burch,
executive director for development
and public affairs

On December 31, 1987 the New York Hospital-Cornell Medical Center successfully completed its $300-million capital campaign, the largest ever undertaken by an academic medical center. Over $304 million was raised, with physicians, volunteers, and staff all playing important roles. The five-year campaign builds on the medical center's outstanding history of volunteer leadership and private philanthropy.

Three major gifts put the campaign over the top in the closing weeks.

Peter S. Kalikow gave $10 million in support of the hospital's modernization program. Mr. Kalikow had earlier provided significant support for renovation of the pediatric ambulatory-services pavilion.

The Starr Foundation and its chairman, Maurice R. Greenberg, committed $6 million toward the construction and equipping of the C. V. Starr Biomedical Information Center in the William and Mildred Lasdon Biomedical Research Center. Prior to the start of the capital campaign, the foundation contributed $7.5 million for the construction of the C. V. Starr Pavilion for Ambulatory Care, Diagnosis, and Treatment, and, during the campaign, it gave $3 million to refurbish patient rooms and $2 million to computerize the intensive care units. In addition, Mr. Greenberg and the foundation jointly established the Maurice R. Greenberg Distinguished Service Award, given yearly to a senior physician.

Mr. and Mrs. B. Gerald Cantor, noted philanthropists and long-time supporters of the medical center, gave $1.5 million toward the construction and equipping of operating rooms adjacent to the Iris and B. Gerald Cantor Ambulatory Surgery Center, also established through the couple's generosity.

These recent gifts culminate a campaign in which more than half the total raised came from individuals. Bequests accounted for $18 million of the campaign's total. Foundations contributed $67 million, and corporations gave nearly $33 million. Private sponsorship of research totaled $57 million. Unrestricted support constituted $26 million, nearly $3 million of which came from the medical center's annual mail appeal. The Cornell University Medical College Fund, which draws principally on contributions from alumni, accounted for $4.3 million.

Some high points of the campaign were as follows:

- A magnificent $50-million endowment gift from an anonymous donor, announced in 1983, has enabled the medical college to undertake major new programs in research and education.
- A $33-million gift from Mr. and Mrs. Harry B. Helmsley, announced in 1986, provides invaluable support for the modernization of the hospital. A key element in this modernization is the newly completed Helmsley Medical Tower, which provides housing for nurses and other medical staff plus temporary quarters for out-of-town patients and their families and offices for physicians and staff. The Helmsley gift also endowed the Helmsley Cardiovascular Center.
- A lead gift of $8.5 million from the late William S. Lasdon and from Mrs. Lasdon initiated the William and Mildred Lasdon Biomedical Research Center. Due to be completed in 1989, this facility is essential to the medical center's future leadership in biomedical science.
- Other campaign gifts have modernized patient-care facilities and broadened the medical center's outreach to its community through programs dealing with teenage pregnancy and parenting, child abuse, and other social problems.

Mr. and Mrs. Sanford Weill

At dedication of Cantor Ambulatory Surgery Center: Mr. and Mrs. B. Gerald Cantor and Rose Cantor

Dr. Isadore Rosenfeld

Peter Kalikow

The campaign enabled New York-Cornell to endow 19 professorships, including two in 1987. The Harold Weill Professorship of Pediatric Hematology in Pediatrics was made possible by the Children's Blood Foundation and by friends and colleagues of its founder, the late Mr. Weill. An anonymous gift from a grateful patient endowed the Mark Pasmantier Professorship of Oncology. Also, the Dillon Fund established an endowment to recognize excellence in nursing care.

Even with the campaign concluded, many groups and individuals continue to volunteer their time and resources on behalf of the medical center.

Since 1982, the Medical Center Advisory Board has offered corporate, professional, and community leaders the opportunity to learn about complex health care issues and to serve as valued counselors. In 1987 Daniel P. Davison succeeded the board's founding chairman, James H. Evans. Frank Markoe Jr. has assumed the board's vice chairmanship.

The Departmental Associates—a group of over 100 New Yorkers with interests in medical education and research, chaired by Sanford B. Ehrenkranz and administered by Dr. Marcus Reidenberg—continued its special support of the medical college's basic science programs.

The Annual Giving Committee, chaired by Mrs. L. Patton Kline, led the medical center's appeal for unrestricted funds.

Partners in Medicine, donors of $1,000 or more annually, has grown dramatically to 1,049 members. The Partners' board, under its founding chairman, Jansen Noyes Jr., and two new vice chairmen, Thomas Bacon and Allan Goldstein, seeks to further expand Partners' membership. A new group, Family Registry, has been established for annual donors of $2,500 and more.

The goals of the department of obstetrics and gynecology were advanced by the Executive Committee of the Lying-In Hospital, led by Mrs. Ronald P. Stanton and Mrs. B. Gerald Cantor. The committee's 1987 benefit, a Bill Blass fashion show presented by Martha, raised funds for research, patient care, equipment, and facilities, thanks to the leadership of Mrs. D. Dixon Boardman, Mrs. Cantor, Mrs. Samuel A. Seaver, Mrs. Stanton, and Bernadette Castro Guida.

In the department of psychiatry, the Chairman's Committee for Special Research in Psychiatry, founded by Robert Liberman and Dr. Robert Michels, coordinates fundraising initiatives and keeps the volunteer leadership abreast of the latest advances in this rapidly developing field. Through the efforts of Mrs. Jon Burnham, Mrs. Allerton Cushman Jr., Lois Beekman Ehrenkranz, Mrs. James McEntee, Mrs. Henry B. Middleton, Mrs. William H. Osborn Jr., and Mr. and Mrs. Liberman, the department's annual benefit, Windows on the Mind, provides significant support for research.

The Pediatric Support Committee continued its sponsorship of lectures on major developments in the field. Through the generous support of singer Paul Simon, the department operates a mobile unit that brings basic medical services to homeless children in temporary hotel shelters.

The department of ophthalmology established the Eye Advisory Council, with Bob Hope as honorary chairman, Henry H. Hoyt Jr. as chairman, and Robert H. Abrams as vice chairman. Campaign co-chairman Jansen Noyes Jr. is working with the council on a campaign for ophthalmology.

Mr. and Mrs. Robert Liberman

At ob/gyn benefit: (from left) Mrs. Samuel Seaver, Frank Markoe, Mrs. B. Gerald Cantor, Mrs. Ronald Stanton, Dr. William Ledger, Bernadette Castro Guida, and Mrs. D. Dixon Boardman

Mrs. Vincent Astor

Mrs. William Lasdon

Under the presidency of Mrs. Benjamin H. Kean, the auxiliary of the Society of the New York Hospital committed essential resources to a variety of projects. An auxiliary-sponsored art benefit in October provided funds for a number of social work programs, including services for children and adults with AIDS and for families of patients in intensive care units.

Cabaret!, the medical center's annual gala benefit, was held on September 28 at the Waldorf Astoria. Under the honorary chairmanship of Mrs. Vincent Astor, and with Mrs. Milton Petrie and Walter B. Wriston serving as co-chairmen, and Mrs. D. Dixon Boardman as vice-chairman, Cabaret! raised more than $1 million in unrestricted support. Greatly appreciated was Iris Cantor's invaluable work on the journal.

On September 14 the medical center's fifth annual symposium on women's health was held at Sotheby's. Co-chaired by Eleanor T. Elliott and Ruth Stanton, this year's symposium focused on the theme, "How Men Affect your Health." New York City's health commissioner, Dr. Stephen Joseph, and poet Judith Viorst were featured luncheon speakers before a capacity audience of women leaders in business, professions, and the arts.

Mrs. C. Payson Coleman and Dr. Joseph P. Whalen, chairman of the department of radiology, together with an active volunteer committee, presented Visitors Day programs in the spring and fall to capacity audiences. Parents from across the country participated in Parents Day last fall, with Dr. and Mrs. Thomas J. Fahey Jr. providing leadership.

Dinners provided congenial occasions for friends of the medical center to meet some of its leading physicians and scientists and learn about their work. Every aspect of our endeavor has benefitted from the dedication of our doctors.

Special thanks go to Dr. David D. Thompson, former director of the hospital; Dr. Thomas H. Meikle Jr., former Stephen and Suzanne Weiss Dean of the medical college; and Frank Markoe Jr., the medical center's former vice chairman for external affairs, for their inspired direction. Robert S. Hatfield, who headed the board of governors of the New York Hospital from 1981 through 1987, was indispensable to the success of the campaign, as was Cornell University's president, Frank H. T. Rhodes.

The medical center's new leadership, Dr. David B. Skinner, president of the hospital; Dr. G. Tom Shires, dean of the medical college; and Robert A. Burch, executive director of development and public affairs, provided much-appreciated support in the campaign's final months. Our thanks to them and to the tireless and cheerful staffs of the office of development and office of public affairs.

We hope all friends of the center share our pride in reaching our campaign goal in record time. We look forward to the continued support of New York–Cornell's friends and family as we face the challenges of the future.

Eleanor T. Elliott

Eleanor T. Elliott
Governor
The New York Hospital

Jansen Noyes, Jr.

Jansen Noyes Jr.
Life Overseer
Cornell University
Medical College

Financial Summary

The Society of the New York Hospital

January 1—December 31, 1987

Revenues	$ Millions	%
Net Inpatient Revenue	301.5	85.3
Net Outpatient Revenue	30.2	8.5
Other Operating Revenue	14.2	4.0
Specific-Purpose Funds Used to Support Current Operations	7.5	2.2
Total	353.4	100.0%
Expenses		
Salaries, Wages and Benefits	218.8	58.2
Medical and Surgical Supplies, Pharmaceuticals & Other Expenses	93.6	24.9
Medical Malpractice and Other Insurance	20.6	5.5
Depreciation, Interest, Leases and Amortization	42.9	11.4
Total	$375.9	100.0%
Operating Loss	$22.5	
Investment Income and Unrestricted Gifts	$12.5	
Expenses in Excess of Revenues	$10.0	

Cornell University Medical College

July 1, 1986—June 30, 1987

Revenues	$ Millions	%
Tuition and Fees	7.0	4.1
Investment Income	9.5	5.5
Restricted Funds for Research and Training	47.6	27.7
State Appropriation	1.2	0.7
Indirect Cost Reimbursement	8.9	5.2
Faculty Practice Plan	90.4	52.5
Other Sources	7.4	4.3
Total Revenues:	172.0	100.0%
Expenses		
Instruction and Research Training	11.8	6.9
Research	38.2	22.2
Libraries and Academic Support	2.9	1.7
Student Services and Student Financial Aid	5.7	3.3
General and Administrative Support	8.1	4.7
Plant Operations	7.2	4.2
Faculty Practice Plan	86.2	50.1
Debt Service	1.0	0.6
Other Expenses and Transfers	10.9	6.3
Total Expenditures:	172.0	100.0%

Statistical Summary 1987

Services to Patients	Laboratory	2,854,904
	Blood Bank	174,323
	Radioisotopes Services	42,764
	X-Ray Examinations	124,747
	Operations	20,684
	Deliveries	3,449
	Electrocardiograms	80,597
	Electroencephalograms	2,856
	Social Services Interviews	348,302
	Therapy Treatments (Physical, Occupational, Recreational	263,605
	Transfusions	31,731
	Pharmacy Prescriptions	1,342,678
	Record Room-New Case Records	55,507
	Average Number of Full-Time Employees	6,028.7
Distribution of Beds	Private	
	Baker-Medicine	78
	Baker-Surgery	39
	Obstetrics and Gynecology	29
	Pediatrics	5
	Total Private	151
	Semi-Private	
	Medical/Surgical	485
	Two-Bed Baker-Medicine	57
	Two-Bed Baker-Surgery	31
	Urology	61
	Obstetrics and Gynecology	96
	Pediatrics	107
	Total Semi-Private	837
	Sub-Total Manhattan Division	988
	Newborn Bassinets	44
	Payne Whitney Clinic	108
	Total Manhattan Division	1,140
	The Westchester Division	322
	Grand Total	1,462
Patient Care	Patients Admitted Manhattan Division	36,464
	Newborn	3,523
	Payne Whitney Psychiatric Clinic	1,052
	The Westchester Division	1,399
	Total	42,438
	Patient Days, All Divisions Including Newborn	452,781
	Visits to Day Hospital	9,411
	Visits to Outpatient Clinics	160,542
	Visits to Emergency Pavilion	42,399

Educational Program

Medical Students	394
Graduate Students	167
M.D.-Ph.D. Students (*medical and graduate enrollments*)	59
Degrees Conferred (*1986-87 academic year*)	115
M.D.	101
Ph.D.	13
M.S.	1
Faculty (*including all affiliates—1986-87 academic year*)	2,801
Full-Time	1,156
Part-Time	115
Voluntary	1,530
House Staff (*NYH-CMC only*)	455
Health-Related Students:	
Dental Hygienists	1
Dietetic Interns	18
Medical Social Workers	8
Surgical Assistants	28
Samuel J. Wood Library (*1986-87 academic year*)	
Users	358,924
Journals (titles)	2,198
Total Volumes	138,979
New Books Received	1,675

Profile of Entering Medical Students September 1987

(101 admitted out of total applicant pool of 4,637)

Men	66
Women	35
Minorities	12
New York State Residents	54
College Majors	Science (74); Non-Science (27)
Mean Grade Point Average	3.55
Average Age	22.6
Age Range	20-37

Universities with Three or More Graduates Admitted:

Cornell University	24	Columbia	3
Harvard University	5	Dartmouth	3
New York University	5	Haverford	3
Univ. of Pennsylvania	5	Johns Hopkins	3
Princeton	4	Hunter	3

Research

(July 1, 1986—June 30, 1987)

Federally Sponsored Research (*including fellowship and research training*)—Total Funding	$37,654,223
Privately Sponsored Research—Total Funding	14,766,279
Research Projects Funded—New and Renewals	364

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Gifts of $500 or more

We extend our deepest thanks to the many loyal supporters of the New York Hospital–Cornell Medical Center. If space permitted, we would wish to list each one of these contributors. We are especially grateful to the following donors and friends.

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Auxiliary

The auxiliary originated in the Social Service Committee, founded in 1912 by the wives of three hospital governors. As its activities expanded beyond social service, the committee evolved into the Women's Auxiliary of the Society of the New York Hospital and later became simply the "auxiliary."

In 1987 the auxiliary donated $227,000 to the New York Hospital and to hospital community projects. Income was derived from contributions, membership dues, television rentals, and sales at the auxiliary's gift shop in the hospital lobby and its thrift shop at 439 East 71st Street. A dinner and gala opening of an exhibition of paintings by Fernand Léger held October 22 at Acquavella Galleries netted $30,000, which was used to support a variety of projects in the hospital's department of social work, including its diversional crafts program.

Other major gifts included:

- $50,000 to the department of obstetrics and gynecology for its birthing room project;
- $30,000 to the department of community relations for expansion of the clinic at the Stanley Isaacs Houses. The clinic provides primary care for the frail elderly;
- $24,000 to the Payne Whitney Clinic's department of social work to underwrite stipends for a summer graduate internship;
- $20,000 for the purchase of a transport jitney to be used by the New York Children's Health Project, which provides comprehensive care for the homeless children living in temporary hotel shelters.

The auxiliary continues to fund publication of a quarterly newsletter that appears in the newspaper *Our Town*, contributes to the Volunteer Services for the Elderly of Yorkville, and supports the New York Hospital AIDS program, the New York Hospital child life department, and Women's Health Day. In the past year the auxiliary refurbished both the gift shop and thrift shop, and the art committee undertook extensive decorating in newly constructed areas of the hospital.

Volunteers

Nineteen eighty-seven was a year of rapid growth in the volunteer services department, with existing programs being expanded and new ones inaugurated. Some 70 departments or programs now use volunteers, who number more than 300. Volunteers gave 61,997 hours of their valuable time during 1987, an increase of almost six percent over the record-setting figure of 1986.

Last year for the first time volunteers contributed their time to the hospital's neonatal nurturing program, to the burn playroom, and to the pediatric AIDS program and clinic. Volunteer participation was also inaugurated in the hospital pharmacy, in ambulatory surgery, and in outpatient radiology.

Further expansion is being planned for 1988. Volunteers are expected to be an integral part of the hospital AIDS clinic, of the rape crisis-intervention program, and of the teenage-mother program of the hospital adolescent clinic.

Our volunteers are unstinting in their efforts on behalf of inpatients, outpatients, and staff, giving not only their time but their talents, skills and love. Those who reached special landmarks of service in 1987 include the following:

25 years
Tess Sarnoff

20 years
Mary O'Brien

15 years
Lollo Erda
Elizabeth Huebner
Jane Kreuttner

10 years
Frances Brandes
Elizabeth Cotilletta
Gertrude B. Epstein
Louise Epstein
Georgette Falco
Bex Gibney
Lilo Komor
Renee Rosenblatt

6,000 hours
Anne Seltzer
John Westmore

5,000 hours
Georgette Falco

4,000 hours
Evelyn Huntman
Jane Kreuttner

3,000 hours
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Governance, 1988

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The New York Hospital–Cornell Medical Center represents an affiliation of the New York Hospital and Cornell University Medical College. Physicians at the medical center have appointments in both institutions.

Chiefs of service at the New York Hospital, with the exception of the physiatrist-in-chief, serve as chairmen of corresponding clinical departments of Cornell University Medical College. Physicians at the hospital have faculty appointments in the medical college. For the sake of simplicity, however, the center's clinical faculty are listed here by their hospital titles only and not by their academic titles.

In addition to the clinical departments, the center also has six basic-science departments. Since the work of these departments consists almost entirely of teaching and research, many basic-science faculty do not have hospital appointments. They are, therefore, listed here by academic title.

The medical center has affiliations with a number of institutions, including the Hospital for Special Surgery, the Burke Rehabilitation Center, Memorial Sloan-Kettering Cancer Center, North Shore University Hospital, Catholic Medical Center of Brooklyn and Queens, St. Barnabas Hospital, the Will Rogers Institute, and LaGuardia Hospital. Because of space limitations, professional staff at these institutions who do not have New York Hospital appointments are not listed in the following pages.

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(January 1, 1988)

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Anesthesiology

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Farida Gadalla, M.D.
Aileen F. Kass, M.D.
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Louis J. Maggio, M.D.
Vinod Malhotra, M.D.
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David G. Susman, M.D.
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Marjorie J. Topkins, M.D.
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Robert A. Seder, M.D.
Peter H. Stein, M.D.
Nicholas D. A. Suite, M.D.
Jo-Ann Suna, M.D.
Cheryl R. Singer Talpalar, M.D.
Joseph P. Tassoni Jr., M.D.
Alan N. Tenaglia, M.D.
Sabino R. Torre, M.D.
Terence K. Trow, M.D.
Paul S. Unger, M.D.
Barbara A. Wismer, M.D.
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Oren J. Cohen, M.D.
Suzanne D. Conzen, M.D.
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Brian F. Daniels, M.D.
Elizabeth A. Drabant, M.D.
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Fayne L. Frey, M.D.
Eliot W. Godofsky, M.D.
Howard L. Haronian, M.D.
Lawrence L. Herman, M.D.
Elizabeth S. Higgs, M.D.
Yveline Danielle Jean-Claude, M.D.
Steven Kaplan, M.D.
Adam H. Kaufman, M.D.
Roger S. Keresztes, M.D.
Walter A. Klein, M.D.
Julie A. Kreager, M.D.
Jay A. Ladenheim, M.D.
Christine A. Laine, M.D.
Richard I. Lappin, M.D.
Alice T. Lyon, M.D.
David B. Messinger, M.D.
Jean E. Mulder, M.D.
Richard E. Nickowitz, M.D.
Norman R. Relkin, M.D.
Peter N. Reusswig, M.D.
Elaine J. Schattner, M.D.
Mindy G. Schuster, M.D.
Rampaul G. Singh, M.D.
Elana G. Snapper, M.D.
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Emily Stern, M.D.
David J. Vaughn, M.D.
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Neurology

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Hart de C. Peterson, M.D.
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Donald J. Reis, M.D.
William R. Shapiro, M.D.

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Thomas C. Guthrie, M.D.
Mark S. Horwich, M.D.
Gerald H. Klingon, M.D.
Henn Kutt, M.D.
David E. Levy, M.D.
Gavril W. Pasternak, M.D., Ph.D
Frank A. Petito, M.D.

Richard W. Price, M.D.
William A. Pulsinelli, M.D., Ph.D.
David A. Rottenberg, M.D.
John A. Schaefer, M.D.
Gail E. Solomon, M.D.
Peter Tsairis, M.D.
Bruce T. Volpe, M.D.
Philip H. Zweifach, M.D.

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Jesse M. Cedarbaum, M.D.
Lisa M. DeAngelis, M.D.
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Richard P. Kraig, M.D., Ph.D.
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Ruth D. Nass, M.D.
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Samuel Rapoport, M.D.
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Barry D. Jordan, M.D.
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Claude Macaluso, M.D.
Mark Malkin, M.D.
Jody Lee Tanabe, M.D.
Lynne Taylor, M.D.

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Thomas C. Wessel, M.D.

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Costantino Iadecola, M.D.
Lisa B. Kole, M.D.
James B. Leverenz, M.D.
Ellen E. Mack, M.D.
Kenneth Maiese, M.D.
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Obstetrics and Gynecology

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Walter B. Jones, M.D.
John L. Lewis Jr., M.D.
Frederick W. Martens, M.D.
Joseph N. Nathanson, M.D.
Richard A. Ruskin, M.D.
S. Francis Ryan, M.D.
Frederick Silverman, M.D.
E. Thomas Steadman, M.D.
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Jerome G. Davis, M.D.
Maurice L. Druzin, M.D.
William J. Hoskins, M.D.
Bernard N. Nathanson, M.D.
Melville A. Platt, M.D.
Desider J. Rothe, M.D.
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George B. Feldman, M.D.
Joseph Finkelstein, M.D.
Wilma Gladstone, M.D.
Margaret J. Graf, M.D.
Martin Gubernick, M.D.
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Andre Heltai, M.D.
J. Milton Hutson, M.D.
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David F. James, M.D.
Radoslav Jovanovic, M.D.
Robert E. Kaye, M.D.
Alan A. Kessler, M.D.
Nancy B. Lebowitz, M.D.
Louis J. Lissak, M.D.
Robert N. Melnick, M.D.
Edward K. C. Mok, M.D.
Amen Ness, M.D.
Gideon G. Panter, M.D.
Joseph I. Paris, M.D.
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David M. Roth, M.D.
Stephen C. Rubin, M.D.
Zoltan I. Saary, M.D.
Robert I. Sassoon, M.D.
Ida Ellen Schwab, M.D.
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Jessica Rosenberg, M.D.
David B. Sable, M.D.
Laura Schiller, M.D.
Audrey M. Seidel, M.D.
Peter T. Simonson, M.D.
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Ophthalmology

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Richard S. Muchnick, M.D.
David Paton, M.D.
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James S. Schutz, M.D.
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Martin Ehrenberg, M.D.
Yale L. Fisher, M.D.
Scott H. Greenstein, M.D.
Judith E. Gurland, M.D.
Gregory K. Harmon, M.D.
Murk-Hein Heinemann, M.D.
Yaffa Kahanowicz, M.D.
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Norman B. Medow, M.D.
Robert F. Munsch, M.D.
Peter M. Odell, M.D.
David B. Pearce, M.D.
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Robert R. Strome, M.D.
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Gregory J. Faust, M.D.
Robert A. Flores, M.D.
Thomas E. Flynn, M.D.
David T. Garrett, M.D.
Michael B. Rivers, M.D.
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Otorhinolaryngology

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Simon C. Parisier, M.D.
Roy B. Sessions, M.D.

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W. Shain Schley, M.D.

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William F. Flynn, M.D.
Inocencio C. Kho, M.D.
Thomas C. McLure III, M.D.
Samuel Nodelman, M.D.
Larry J. Shemen, M.D.
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Peter T. Galantich, M.D.
Norman Holzberg, M.D.
Charles Juarbe, M.D.
Jeff D. Kopelman, M.D.

Pathology

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N. Scott McNutt, M.D.
Myron R. Melamed, M.D.
C. Richard Minick, M.D.
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Adolfo Firpo-Betancourt, M.D.
Patricia M. Fishman, M.D.
Thomas A. Godwin, M.D.
Winston G. Harrison, M.D.
June H. Koizumi, M.D.
Margret L. S. Magid, M.D.
George Niedt, M.D.
Powers Peterson, M.D.
Philip G. Prioleau, M.D.
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Priscilla I. Figueroa, M.D.
Sarah S. Frankel, M.D.
Laura S. Hair, M.D.
Susan D. Leslie, M.D.
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Joseph L. Rayburn, M.D.
Bruce R. Smoller, M.D.

Interns
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Geraldine A. Mercer, M.D.
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Gerald Minkowitz, M.D.

Pediatrics

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Mary Allen Engle, M.D.
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Richard J. O'Reilly, M.D.
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Hart de C. Peterson, M.D.
Irwin Rappaport, M.D.
Alfred L. Scherzer, M.D.
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Barbara Ann Dash, M.D.
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Diane B. Gareen, M.D.
Doris K. Goldberg, M.D.
Albert C. Holtzman, M.D.
Lisa Cooper Hudgins, M.D.
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Carmela R. Carpanzano, M.D.
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Psychiatry

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Richard A. Flamberg, M.D.
Nancy C. Horowitz, M.D.
Lawrence Kelmenson, M.D.
Sonia O. Kulchycky, M.D.
Dario LaRocca, M.D.
Julio Licinio, M.D.
Ruth Held Martin, M.D.
Richard H. McCarthy, M.D.
Gregory A. Miller, M.D.
Danielle Murstein, M.D.
David Pelino, M.D.
Bradford B. Perry, M.D.
Brian D. Poeschla, M.D.
Carla M. Polcyn, M.D.
Burton Presberg, M.D.
Charles P. Ramesar, M.D.
Steven J. Romano, M.D.
Mark A. Scher, M.D.
Ellen K. Schlefer, M.D.
Mark E. Servis, M.D.
Bennett I. Solnick, M.D.
Robert J. Solomon, M.D.
Madeleine Stam, M.D.
Mariann Turato, M.D.
Ellen Koch Utley, M.D.
Carol W. Weinstein, M.D.
L. Adele West, M.D.

Radiology

Medical Staff

Radiologist-in-Chief
Joseph P. Whalen, M.D.

Attending Radiologists
Mostafa A. Batata, M.D.
David V. Becker, M.D.
Yahya M. Berkmen, M.D.
Florence C. Chu, M.D.
Michael D. F. Deck, M.B.,B.S.
John A. Evans, M.D.
Robert H. Freiberger, M.D.
Amy Beth Goldman, M.D.
David B. Hayt, M.D.
Elias Kazam, M.D.
Jae Ho Kim, M.D.
Lourdes Nisce, M.D.
Nathan Poker, M.D.
Thomas A. Sos, M.D.
R. Caird Watson, M.D.
Patricia Winchester, M.D.

Associate Attending Radiologists
Paula W. Brill, M.D.
F. Mitchell Cummins, M.D.
Bernard Ghelman, M.D.
Antonio F. Govoni, M.D.
James R. Hurley, M.D.
Helene Pavlov, M.D.
William A. Rubenstein, M.D.
Robert Schneider, M.D.
George Stassa, M.D.
Hind S. Teixidor, M.D.
Robert D. Zimmerman, M.D.

Assistant Attending Radiologists
Gerald F. Abbott, M.D.
Steven A. Albert, M.D.
Barbara Lucile Binkert, M.D.
Georgia A. Cataldi, M.D.
Sheila D. Davis, M.D. (leave of absence)
Richard J. Gray, M.D.
Andrew W. Haraway Jr., M.D.
Linda A. Heier, M.D.
Claudia I. Henschke, M.D.
James C. Hirschy, M.D.
Seymour Hopfan, M.D.
Kiran A. Jain, M.D.
Carl E. Johnson, M.D.
Richard J. Katz, M.D.
Young Sook Kim, M.D.
George Krol, M.D.
Susan C. Krysiewicz, M.D.
Miriam Levy-Ravetch, M.D.
Steven P. Lipman, M.D.
Charlynn C. Maniatis, M.D.
John A. Markisz, M.D.
Marlene E. Rackson, M.D.
Elizabeth Ramirez de Arellano, M.D.
Salil D. Sarkar, M.D.
Scott J. Sherman, M.D.
Gordon Sze, M.D.
Karen Weingarten, M.D.
David A. Wojtasek, M.D.
David F. Yankelevitz, M.D.
Kenneth Zirinsky, M.D.

Clinical Affiliate
Martin Barandes, M.D.

Professional-Associate Staff

Attending Physicist
(Nuclear Medicine)
Rodney E. Bigler, Ph.D.

Assistant Attending Physicist
(Nuclear Medicine)
Pat Zanzonico, Ph.D.

Professional Associate
(Physics)
Stephen Balter, Ph.D.

Graduate Staff

Clinical Fellows
Antonio G. Bermudez, M.D.
Lawrence Carl, M.D.
Andrew J. Collins, M.D.
Jacob Cynamon, M.D.
Sylvie Destian, M.D.
Shari B. Epstein, M.D.
Harris A. Freed, M.D.
Lawrence F. Ginsberg, M.D.
John Greco, M.D.
Alison Bender Haimes, M.D.
Anna Kelly, M.D.
Peter A. Kosovsky, M.D.
Chandra Nataraj, M.D.
Carl Tack, M.D.
Sue H. Winard, M.D.
David R. P. Zulauf, M.D.

Assistant Radiologists
(Nuclear Medicine)
Kathleen D. Friend, M.D.
Paul T. Verona, M.D.

Assistant Radiologists
Thomas P. Boyle, M.D.
Ana G. Cajade, M.D.
Gail A. Calamari, M.D.
Samuel Choi, M.D.
Patricia F. Cole, M.D.
Gerard A. Compito, M.D.
Christopher J. Conners, M.D.
Frank A. DuPont, M.D.
Robert R. Ford, M.D.
Shulamith Goldberg, M.D.
Santiago J. Hernandez, M.D.
Anand S. Jagannath, M.D.
Caren Jahre, M.D.
Risa H. Kent, M.D.
Albert N. Kim, M.D.
Terry L. Levin, M.D.
Laura Liberman, M.D.
Steven V. Lossef, M.D.
Ronald A. Manfredi, M.D.
Kenneth P. Morrison, M.D.
Levon N. Nazarian, M.D.
Bette J. Nyhlen, M.D.
Steven R. Olson, M.D.
Richard A. Sarner, M.D.
Lawrence H. Schwartz, M.D.
Donna M. Scuderi, M.D.
Craig H. Sherman, M.D.
John Sierra, M.D.

Rehabilitation Medicine

Medical Staff

Physiatrist-in-Chief
Willibald Nagler, M.D.

Associate Attending Physiatrists
Hermina Z. Benjamin, M.D.
Ronald F. Green, M.D.
Emmanuel Rudd, M.D.

Assistant Attending Physiatrists
Subhadra L. Nori, M.B.,B.S.
Irene von Estorff, M.D.

Clinical Affiliates
(Physiatry)
Irina Barkan, M.D.
Isabella Maria Rampello, M.D.
Peter H. Stern, M.D.

Professional-Associate Staff

Professional Associates
Delia Gorga, Ph.D.
Michael E. Groher, Ph.D.
R. Paul Jordan, D.P.M.
H. Richard Lehneis, Ph.D.
Lydia Wingate, Ph.D.

Professional Associate
(Podiatry)
Michael Polchaninoff, D.P.M.

Graduate Staff

Assistant Physiatrists
Michael J. Brennan, M.D.
Hope Schuyler Hacker, M.D.
Timothy Hall, M.D.
Sheryl R. Levin, M.D.
Gale Pugliese, M.D.
Jack L. Rook, M.D.
Michael Sinel, M.D.
John A. Sklar, M.D.

Surgery

Surgeon-in-Chief
G. Tom Shires, M.D.

General Surgery

Medical Staff

Attending Surgeons
Murray F. Brennan, M.D.
Jerome J. Decosse, M.D.
Peter Dineen, M.D.
S. Frank Redo, M.D.
Albert L. Rubin, M.D.
Kurt H. Stenzel, M.D.
Bjorn Thorbjarnarson, M.D.
George E. Wantz, M.D.
John C. Whitsell II, M.D.

Associate Attending Surgeons
Harry L. Bush, Jr., M.D.
Jhoong S. Cheigh, M.D.
George N. Cornell, M.D.
Armand F. Cortese, M.D.
John Mihran Davis, M.D.
Cleon W. Goodwin, M.D.
Peter M. Guida, M.D.
Stephen F. Lowry, M.D.
Vincent F. Marzulli, M.D.
Kevin P. Morrissey, M.D.
Walter F. Pizzi, M.D.
Robert R. Riggio, M.D.
Stuart D. Saal, M.D.
Michael F. Silane, M.D.
Paul A. Skudder, M.D.
William T. Stubenbord, M.D.
John F. Sullivan, M.D.
Luis Tapia, M.D.
Roger W. Yurt, M.D.

Assistant Attending Surgeons
Anthony C. Antonacci, M.D.
John M. Aronian III, M.D.
Philip S. Barie, M.D.
James L. Clarke, M.D.
William T. Curry, M.D.
Kenyon B. Field, M.D.
Jerome Finkelstein, M.D.
James P. Gaston, M.D.
Paul H. Halebian, M.D.
John G. Hansen, M.D.
Michael R. Madden, M.D.
Carmine J. Mauro, M.D.
Joseph A. McAuley, M.D.
Eugene J. Nowak, M.D.
Craig D. Rhyne, M.D.
G. Tom Shires III, M.D.
David S. Speer, M.D.
Harry Statman, M.D.
John C. L. Wang, M.D.

Clinical Affiliates
David A. Mayer, M.D.

Professional-Associate Staff

Surgeons' Assistants
Diana L. D'Amelio
Donna M. Hamilton
David Johnson
John Lee
Mary L. Lombardi
Geoffrey O'Sullivan
Andrea J. Portenoy
Howard F. Rose
Phyllis G. Scampas

Graduate Staff

Clinical Fellows
Yuman Fong, M.D.
David G. Hesse, M.D.
Michael A. Marano, M.D.
Eric Z. Matayoshi, M.D.
Joseph P. Miner, M.D.
Mark L. Silen, M.D.
Ronald J. Wong, M.D.

Surgeons
James P. Anthony, M.D.
Mary Sue Brady, M.D.
Daniel G. Ciaburri, M.D.
Neil B. Friedman, M.D.
Andrew I. Glantz, M.D.
Robert T. Grant, M.D.
William G. Jones II, M.D.
Eric B. Whitacre, M.D.

Assistant Surgeons
James D. Albert, M.D.
Annabel E. M. Barber, M.D.
James V. Bono, M.D.
David M. Brams, M.D.
John M. Brown III, M.D.
Tam Bui, M.D.
W. Michael Canning, M.D.
Eli R. Capouya, M.D.
Chris E. Chernesky, M.D.
Armann O. Ciccarelli, M.D.
Mark A. Codner, M.D.
Michael S. Conte, M.D.
Stephen F. Ettinghausen, M.D.
Thomas J. Fahey III, M.D.
Gary A. Fantini, M.D.
John M. Feder, M.D.
Eva Fischer, M.D.
Michelle Gerwin, M.D.
Louis Gevirtzman, M.D.
Arthur S. Hawes, M.D.
Allen B. Jetmore, M.D.
Wilson Ko, M.D.
Jeffrey Lapevrolerie, M.D.
Marisa Lawrence, M.D.
I. Michael Leitman, M.D.
Steven K. Macheers, M.D.
Jonathan D. Mandell, M.D.
Edward J. Marcaccio Jr., M.D.
Stanley B. Martin, M.D.
Stephen M. Martin, M.D.
M. Victor McLaughlin Jr., M.D.
Eric J. Miller, M.D.
Joel S. Peck, M.D.
Gregory W. Randolph, M.D.
Alan I. Reed, M.D.
Catherine A. Ronaghan, M.D.
Alexandra H. Simkovich, M.D.
Joph Steckel, M.D.
Kenneth K. Tanabe, M.D.
James R. Taylor Jr., M.D.
J. Rogers Temple Jr., M.D.
William A. Thompson III, M.D.
Kimberly J. Van Zee, M.D.
Joseph R. Vitolo, M.D.

Cardiothoracic Surgery

Medical Staff

Attending Surgeon-in-Charge
O. Wayne Isom, M.D.

Attending Surgeons
Cranston W. Holman, M.D.
David B. Skinner, M.D.

Associate Attending Surgeons
John C. McCabe, M.D.
Arthur J. Okinaka, M.D.
Valavanur A. Subramanian, M.D.

Assistant Attending Surgeons
Nasser K. Altorki, M.D.
Michael E. Burt, M.D.
Jeffrey P. Gold, M.D.
Karl H. Krieger, M.D.
Samuel J. Lang, M.D.
Robert B. Peyton, M.D.

Graduate Staff

Clinical Fellow
William D. Lazenby Jr., M.D.

Thoracic Surgeons
H. Stephen Hudgens, M.D.
Carl Swayze Rigby, M.D.

Assistant Thoracic Surgeons
Lawrence H. Durban, M.D.
Barry J. Zadeh, M.D.

Dental and Oral Surgery

Medical Staff

Attending Oral Surgeon-in-Charge
Stanley J. Behrman, D.M.D.

Attending Dentist
John J. Putnam, D.D.S.

Associate Attending Oral Surgeon
David A. Behrman, D.M.D.

Associate Attending Dentist
(Endodontist)
Nelson I. Mendell, D.M.D.

Associate Attending Dentist
(Myo-Functional Therapy)
Harvey Miller, D.D.S.

Associate Attending Dentist
(Orthodontist)
Joseph D. Davis, D.D.S.

Associate Attending Dentists
(Periodontists)
Seymour M. Koteen, D.D.S.
Joseph E. Rowan, D.D.S.

Associate Attending Dentists
(Prosthodontists)
Gerald M. Galvin, D.D.S.
Jason C. Lee, D.D.S.
Ivin B. Prince, D.D.S.

Associate Attending Dentist
(TMJ)
Leonard F. Quitt, D.D.S.

Associate Attending Dentists
Lawrence A. Behrman, D.D.S.
Louis Marino, D.D.S.
Ernest R. Piccaro, D.D.S.

Assistant Attending Oral Surgeons
Steven M. Baum, D.D.S.
Thomas M. Darrigan, D.D.S.
Arthur C. Elias, D.M.D.
Michael R. Glogoff, D.M.D.
Jerry I. Halpern, D.D.S.
Andrew J. Hauser, D.D.S.
Claudia B. Kaplan, D.D.S.
Frederick M. Lifshey, D.D.S.
Peter H. Pruden, D.D.S.
Steven J. Tunick, D.M.D.

Assistant Attending Dentist
(Endodontist)
Sebastian J. Lentini, D.D.S.

Assistant Attending Dentist
(Myo-Functional Therapy)
Michael G. Steinberg, D.D.S.

Assistant Attending Dentists
(Orthodontists)
Marc S. Lemchen, D.M.D.
Gregory W. Sanford, D.M.D.

Assistant Attending Dentists
(Pedodontists)
Louis M. Cooper, D.D.S.
Mark S. Hochberg, D.D.S.
David J. Levine, D.D.S.
Jack I. Mitchell, D.D.S.

Assistant Attending Dentists
(Periodontists)
Barry M. Libin, D.D.S.
Philip D. Pack, D.M.D.
George W. Sferra Jr., D.D.S.

Assistant Attending Dentists
Salvatore J. Durante, D.D.S.
Richard F. Giannandrea, D.D.S.
Robert Karsten, D.D.S.
Guy N. Minoli, D.D.S.
Jonathan Prince, D.D.S.
Steven Saltzman, D.D.S.
Robert M. Sorin, D.M.D.

Graduate Staff

Oral Surgeon
Robert D. Carpenter, D.M.D.

Assistant Oral Surgeon
George P. Tavolilla, D.D.S.

Intern
Jonathan T. Perry, D.D.S.

Interns-General Practice Residency Program
Gregory C. Chotkowski, D.M.D.
Kevin J. Penna, D.D.S.
Zion Tsabbar, D.D.S.
Michael J. Vassallo, D.D.S.

Neurosurgery

Medical Staff

Attending Surgeon-in-Charge
Russel H. Patterson Jr., M.D.

Attending Surgeon
Richard A. R. Fraser, M.D.

Associate Attending Surgeons
Joseph H. Galicich Jr., M.D.
Francis W. Gamache Jr., M.D.
Michael H. Lavyne, M.D.

Assistant Attending Surgeons
Jamshid B. G. Ghajar, M.D.
Robert B. Snow, M.D.

Graduate Staff

Surgeon
John B. Robbins, M.D.

Assistant Surgeons
David W. Andrews, M.D.
John M. Emery III, M.D.
Mazen Khayata, M.D.
Kevin J. Tracey, M.D.

Orthopedics

Medical Staff

Surgeon-in-Chief, The Hospital For Special Surgery
Philip D. Wilson Jr., M.D.

Attending Surgeons
John H. Doherty, M.D.
Allan E. Inglis, M.D.
John N. Insall, M.D.
Bernard Jacobs, M.D.
Joseph M. Lane, M.D.
David B. Levine, M.D.
Chitranjan S. Ranawat, M.D.
Leon Root, M.D.
Eduardo A. Salvati, M.D.
L. Ramsay Straub, M.D.

Associate Attending Surgeons
Walter H. O. Bohne, M.D.
Stephen William Burke, M.D.
John P. Lyden, M.D.
Peter J. Marchisello, M.D.
Ralph C. Marcove, M.D.
Thomas P. Sculco, M.D.
Russell F. Warren, M.D.

Assistant Attending Surgeons
Abraham T. Appleton, M.D.
Charles N. Cornell, M.D.
John H. Healey, M.D.
Norman A. Johanson, M.D.
Richard McCormack Jr., M.D.
Stephen J. O'Brien, M.D.
Jeanne R. Pamilla, M.D.
Paul M. Pellicci, M.D.
Kosta P. Velis, M.D.
Thomas L. Wickiewicz, M.D.
Russell E. Windsor, M.D.

Graduate Staff

Surgeons
David W. Altchek, M.D.
Daniel D. Buss, M.D.
Ira J. Chernoff, M.D.
Mark P. Figgie, M.D.
Kevin L. Garvin, M.D.
Allan E. Inglis Jr., M.D.
Robert C. Klapper, M.D.
Michael F. Lospinuso, M.D.
Robert Marchand, M.D.
Peter F. Merkle, M.D.
David G. Mohler, M.D.
George F. Muschler, M.D.
Steven G. Robbins, M.D.
Malcolm Z. Roth, M.D.
Giles R. Scuderi, M.D.
Nicholas A. Sgaglione, M.D.
Michael J. Skyhar, M.D.
Harvey F. Smires Jr., M.D.
Judith W. Smith, M.D.
Samuel J. Snyder, M.D.
Lon Weiner, M.D.

Assistant Surgeons
Walter B. Beaver, M.D.
Michael S. Bednar, M.D.
Mark K. Bowen, M.D.
Robert L. Buly, M.D.
Stephen P. England, M.D.
William F. Flynn Jr., M.D.
Steven B. Haas, M.D.
Serena Shaw Hu, M.D.
Scott G. Kantor, M.D.
Kenneth J. Kress, M.D.
Michael J. Maynard, M.D.
Drew V. Miller, M.D.
William H. Montgomery, M.D.
Michael C. Moran, M.D.
Christopher S. Mow, M.D.
Stephen J. Nicholas, M.D.
Douglas E. Padgett, M.D.
Brendan M. Patterson, M.D.
Jeffery L. Pierson, M.D.
Louis H. Rappoport, M.D.
T. Scott Stanwyck, M.D.
Steven H. Stern, M.D.
Scott W. Wolfe, M.D.
Steven B. Zelicof, M.D.

Plastic Surgery

Medical Staff

Acting Attending Surgeon-in-Charge
Lloyd Hoffman, M.D.

Associate Attending Surgeons
Randolph H. Guthrie Jr., M.D.
James W. Smith, M.D.

Assistant Attending Surgeons
Robert L. Cucin Jr., M.D.
Joseph Feinberg, M.D.
David A. Hidalgo, M.D.
Gerald Imber, M.D.
Thomas C. McLure III, M.D.
Kenneth O. Rothaus, M.D.
Robert G. Schwager, M.D.
B. Donald Sklansky, M.D.

Clinical Affiliate
Edward W. Powers, M.D.

Graduate Staff

Surgeons
Joseph B. O'Connell, M.D.
Eric Slone, M.D.

Assistant Surgeons
Richard M. Hodnett, M.D.
Marcia V. Ormsby, M.D.
James M. Sheridan, M.D.
John G. Sparrow, M.D.

Urology

Medical Staff

Attending Surgeon-in-Charge
E. Darracott Vaughan Jr., M.D.

Attending Surgeons
William R. Fair, M.D.
John G. Keuhnelian, M.D.
Russell W. Lavengood Jr., M.D.
John H. McGovern, M.D.
Edward C. Muecke, M.D.
Willet F. Whitmore Jr., M.D.
John J. Williams, M.D.

Associate Attending Surgeons
John W. Coleman, M.D.
Harry W. Herr, M.D.
David T. Miminberg, M.D.
W. Reid Pitts Jr., M.D.
Jon M. Reckler, M.D.
Robert A. Riehle Jr., M.D.

Assistant Attending Surgeons
Felix I. Badillo, M.D.
Neil H. Bander, M.D.
John D. Birkhoff, M.D.
John C. Byrne, M.D.
Stephen Fortunoff, M.D.
John A. Fracchia, M.D.
Myron E. Freund, M.D.
Marc Goldstein, M.D.
Urbano K. Guarin, M.D.
Jack I. Hershman, M.D.
Nachum M. Katlowitz, M.D.
Kenneth R. Kurz, M.D.
Franklin C. Lowe, M.D.
Isaac Madeb, M.D.
James P. McCarron Jr., M.D.
Thomas P. McGovern, M.D.
Piero O. Niceta, M.D.
Jay S. Rosen, M.D.
Gene S. Rosenberg, M.D.
R. Ernest Sosa, M.D.
Michael H. Wechsler, M.D.
Paul L. Ziegler, M.D.

Clinical Affiliate
Robert S. Waldbaum, M.D.

Graduate Staff

Clinical Fellows
Arthur R. Crowley, M.D.
Brett C. Mellinger, M.D.
William J. Somers, M.D.

Surgeons
Jean-Francois Eid, M.D.
Marcus H. H. Loo, M.D.

Assistant Surgeons
Edward M. Beck, M.D.
Kenneth J. Bregg, M.D.
Bruce R. Gilbert, M.D.
Jeffrey I. Gorelick, M.D.
Neal D. Shore, M.D.
Robert L. Steckler, M.D.

Directors of Laboratories

Clinical Pathology Laboratories

Pathologist-in-Chief
John T. Ellis, M.D.
Laboratory Manager
Marvin Tessler, Ph.D.
Consultant in Clinical Biochemistry
Alton Meister, M.D.

Blood Bank and Transfusion Service
Director
Carl F. W. Wolf, M.D.
Assistant Director
Annie M. Strupp, M.D.

Clinical Biochemistry
Acting Director
Edward Schubert, Ph.D.
Assistant Director
Gordon F. Fairclough Jr., Ph.D.

Clinical Hematology
Director
Carl G. Becker, M.D.
Associate Director
Adolfo Firpo-Betancourt, M.D.

Clinical Microbiology
Director
Laurence B. Senterfit, Sc.D.

Cytogenetics
Director
M. Lita Alonso, M.D.

Cytology
Director
Charles A. Santos-Buch, M.D.
Assistant Director
June H. Koizumi, M.D.

Surgical Pathology
Director
C. Richard Minick, M.D.
Associate Director
Janet A. Mouradian, M.D.
Assistant Director
Elmer E. Kramer, M.D.

Clinical Laboratory Computer Services
Director
Jerald D. Gass, Ph.D.

Clinical Diagnostic Laboratories, Directors

Basal Metabolism
David V. Becker, M.D.

Cardiac Catheterization, Adult
Jeffrey Borer, M.D.

Cardiac Catheterization, Pediatrics
Aaron R. Levin, M.D.

Cardiac Graphics, Adult
Paul D. Klightield, M.D.

Cardiac Graphics, Pediatrics
Kathryn H. Ehlers, M.D.
Electroencephalography
Gail E. Solomon, M.D.
Neurophysiology
Jonathan Victor, M.D., Ph.D.
Nuclear Medicine
David V. Becker, M.D.
Pediatric Exercise
Michael S. Snyder, M.D.
Pulmonary Function
Thomas K. C. King, M.D.
Apothecary-in-Chief
W. James Bicket, M.S.

Division of Nursing

Senior Administrative Staff

Vice President for Nursing
Anne A. Cote, M.P.A., R.N.

Director of Nursing Practice
Janet L. McBride, M.A., R.N.

Director of Nursing Administration
Doris Glick, M.P.H., R.N.

Director of Clinical Nursing
(to be filled)

Director of Educational Programs
Louise S. Hazeltine, M.A., R.N.

Directors

Diane Dowdell, M.S., R.N.
Operating Room Recovery Room Ambulatory Surgery Center Cystoscopy
Barbara Heavey, M.A., R.N.
Ambulatory Care Nursing
Karen Kirschner, M.S., R.N.
Medical Nursing
Kenneth Larson, M.A., R.N.
Psychiatric Nursing Payne Whitney Clinic
Shelley Lubart, M.S., R.N.
Obstetrical Gynecological Pediatric Nursing
Patricia Massi, M.A., R.N.
Surgical Nursing

Basic Science Departments, Cornell University Medical College

Biochemistry

Chairman
Alton Meister, M.D.
(Israel Rogosin Professor of Biochemistry)

Emeritus Professors
Aaron S. Posner, Ph.D.
Julian R. Rachele, Ph.D.

Professors
Adele L. Boskey, Ph.D.
Esther M. Breslow, Ph.D.
Rudy H. Haschemeyer, Ph.D.
Abraham Novogrodsky, M.D., Ph.D.
Albert L. Rubin, M.D. (surgery)
Richard L. Soffer, M.D. (medicine)
Kurt H. Stenzel, M.D. (surgery)

Adjunct Professors
Chun-Yen Lai, Ph.D.
Carl Monder, Ph.D.
Sidney Udenfriend, Ph.D.

Associate Professors
Owen W. Griffith, Ph.D.
David Hajjar, Ph.D.
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Joshua Muscat, M.P.H.

Teaching Associates
Martha Hickerson, M.S.W.
Irwin Katz, M.P.H.
Susan Nitto, M.S.N.
Lucille Plantemoli, M.P.H.

Deaths

We note with great regret the passing during 1987 of the following members of the center's professional staff and faculty:

William R. Grafe Jr., M.D.
Attending Surgeon
George E. Murphy, M.D.
Attending Pathologist
Francis P. Twinem, M.D.
Honorary Staff

Making a Gift to the New York Hospital-Cornell Medical Center

A Guide for You and Your Attorney

Gifts, bequests and trusts are important sources of support for the New York Hospital-Cornell Medical Center. Such gifts provide funding for a wide range of programs, including those that provide patient care, educate future physicians and scientists, and expand community outreach. Additionally, these gifts make possible pioneering biomedical research which results in new and improved cures and treatments for disease, helping people today as well as in future generations.

Gifts may be made in a number of ways—by cash, securities, or tangible property. They may be given outright, by bequest, or through a trust arrangement which can provide an income to the medical center, to the donor, or to his or her beneficiaries, for a predetermined period of time or for life.

The medical center encourages gifts without restriction so as to permit greater flexibility in planning and administering its extensive programs in patient care, education and research. However, if a donor is interested in making a gift, bequest, or trust to be used in whole or in part for any specific purpose within the hospital, medical college, or medical center, such use may be specified.

Because the institutions constituting the New York Hospital-Cornell Medical Center (the New York Hospital and Cornell University Medical College) are voluntary, nonprofit institutions contributing to the public welfare, gifts to the medical center by individuals, foundations, or corporations are exempt from income, gift, and inheritance taxes to the extent and in the manner provided by federal and state laws.

The medical center is pleased to provide information about its numerous programs and activities, and to consult with donors and their advisors about various gift ideas, many of which provide a naming opportunity.

The Society of the New York Hospital, which is the legal corporate name for the New York Hospital, is a corporation created by Royal Charter granted by King George III of England in 1771. The suggested terminology for an unrestricted bequest to or for its benefit is: "I give, devise and bequeath to The Society of the New York Hospital Fund, Inc., a corporation created under the New York State Not-for-Profit Corporation Law and located in New York City, New York the sum of $ _____ (or description of the property) to be used for the general corporate purposes of The Society of the New York Hospital as its board of directors should determine."

If a bequest is made to the medical college, the language may be: "I give and bequeath to Cornell University the sum of $ _____ or (description of property) for use in connection with its Medical College in New York City."

If a bequest is made to the medical center, the language may be, "I give and bequeath to The New York Hospital-Cornell Medical Center the sum of $ _____ (or description of property)."

Further information about making a gift to the hospital, college, or medical center can be obtained from Nancy M. Walker, Director of Development, The New York Hospital-Cornell Medical Center, 525 East 68th Street, New York, NY 10021, 212/517-1700.

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The New York Hospital-Cornell Medical Center
525 East 68th Street, New York, N.Y. 10021

Annual
Report 1988

THE NEW YORK HOSPITAL – CORNELL MEDICAL CENTER

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Cover: The caduceus, symbol of the medical profession, as depicted in the brickwork of the New York Hospital-Cornell Medical Center.

CHAIRMEN'S REPORT

Government efforts to constrain health-care costs are creating unprecedented challenges for academic medical centers. Nowhere is this more true than in New York City, with its spiraling labor costs and its high incidence of AIDS and homelessness. With expenses rising and government funding not keeping pace, the New York Hospital suffered a considerable financial deficit in 1988.

The size of the deficit clearly must be a matter of urgent concern. Equally important, though, has been the response of the hospital to a very difficult situation. Faced with problems that could have easily produced a climate of defeatism, Dr. David Skinner and the institution's leadership launched an exhaustive effort to insure that the hospital not only continued to provide the best in care but did so in the most efficient way. The result has been millions of dollars in savings and the prospect of more to come—all with no dimunition in the quality of care.

As a leading health-care institution, this medical center must demonstrate leadership in responding to our country's overarching need to restrain increases in health-care costs. On the other hand, it must be remembered that academic centers have very special responsibilities—as guardians of high standards of care, as educators of tomorrow's doctors, as centers of research. To a considerable extent, they determine the future course of American medicine.

"Despite serious problems, the past year has brought very real satisfactions."

If academic medical centers are to continue to be engines of progress, government at all levels must appreciate the magnitude and complexity of their task. Reimbursement for patient care must be set at realistic levels, and the need to reconstruct aging facilities must be recognized. At this medical center, plans for major modernization of our 60-year-old core facilities have gone forward in the expectation that state approval will be forthcoming.

Despite serious problems, the past year has brought very real satisfactions. Not only were critical financial problems addressed, but two buildings essential to the modernization process were dedicated—the 36-story Helmsley Medical Tower and the William and Mildred Lasdon Biomedical Research Center. The medical college underwent a lengthy accrediting process and emerged with a seven-year accreditation, the maximum amount granted. Still another source of satisfaction was the establishment of an affiliation early in 1989 between NYH-CMC and its neighbor Lenox Hill Hospital.

Perhaps most gratifying of all has been the tremendous outpouring of support from friends of the medical center. Although the center's capital campaign was successfully concluded at the end of 1987, over $39 million in gifts were received last year. What makes this all the more impressive is that no gift exceeded $2 million, a fact that speaks volumes about the center's depth of support in the community, the commitment of its physicians and volunteers, and the skill of Mr. Robert Burch and his public-affairs and development staffs.

In the final analysis, it was a spirit of cooperation at all levels that made progress possible during a sometimes-difficult year. On behalf of the boards of both institutions, we thank the 8,000 people who work at this medical center for a job well done.

Frank H. T. Rhodes
Joint Board Chairman, 1988

Maurice R. Greenberg
Joint Board Chairman, 1989

All Americans can be proud of this nation's health-care system. Millions of people—from the most fragile preemies to the most fragile octogenarians—benefit from the dedicated efforts of the best-trained physicians, nurses and technicians. Now our health-care system must respond to some of the greatest challenges it has ever faced. As part of that system, the New York Hospital has already made significant responses to these challenges and is primed to move forward with even more innovative endeavors.

Americans willingly pay the high price necessary to insure that the best medical care is available to the most people. Today 11 percent of our gross national product is consumed by meeting that goal. Yet, demands on the country's health-care system continue to escalate, even beyond our ability to pay. In an attempt to make health-care dollars go further, federal and state governments, as well as private insurers, have changed their methods of reimbursing hospitals for inpatient care. The new policy falls most heavily on the hospitals which serve the sickest patients. The New York Hospital is in that category.

Under the former system, reimbursement was determined by the length of a patient's hospital stay and the expenses incurred during that hospitalization. The new system requires hospitals to be reimbursed at a flat rate based on the patient's diagnosis, regardless of length of stay or cost of care. In New York State, this shift was initiated for Medicare patients in 1986 and for most other patients last year.

"Our health-care system must respond to some of the greatest challenges it has ever faced . . .The New York Hospital has already made significant responses to these challenges."

A great deal can be said in favor of this new prospective-rate system. However, rates of disbursement must be reset so that hospitals are able to meet rising labor and treatment costs. It is also vital that teaching hospitals, such as the New York Hospital, continue to receive adequate Medicare funding to cover the costs of their educational programs for house staff and medical students.

Inequitable reimbursement must not be permitted to compromise high-quality care and training, and so the hospital has intensified its efforts to communicate its needs to elected and appointed public officials. We have also joined the Greater New York Hospital Association, the Hospital Association of New York State, and a consortium of New York City voluntary teaching hospitals in seeking to convey our sense of urgency to legislators in Albany and Washington.

The urgency of the message has been heeded: as of May 1989, some proposed reductions in Medicare and Medicaid reimbursement have been withdrawn. However, our financial guideline still remains the efficient deployment of scarce resources.

The new reimbursement system has also had particular impact on the New York Hospital in another way: the system puts a premium on patient admissions rather than on the percentage of beds occupied. The institution of the new system coincided with the opening of the C. V. Starr Pavilion, an 11-story facility that includes the Iris and B. Gerald Cantor Ambulatory Surgery Center and that greatly expands the hospital's capacity for ambulatory care. The number of ambulatory-surgery procedures completed at the hospital tripled in 1988, as the Starr Pavilion achieved its goal of providing the highest-quality and most cost-efficient outpatient care to our local communities. However, this rise in ambulatory-care procedures produced a concomitant decrease in

inpatient admissions, since many patients who previously would have been admitted to the hospital could now be cared for as outpatients.

The hospital has taken steps to counteract the resulting decrease in admissions. Clinical services have established specific goals, the achievement of which is carefully monitored. Admitting privileges have been extended to a number of interested physicians. The renovation of selected hospital units is being accelerated. Pending state approval, the hospital continues to plan for a major modernization of its 60-year-old facility.

A further complication associated with the new reimbursement system is the apparent contradiction between the goals of high-quality medical care and shorter lengths of hospitalization. Our study of the matter has indicated that there need be no contradiction between the two; however, achieving both goals requires changes at virtually every level of the institution.

Accepting this mandate, the hospital established a task force of physicians and management personnel—helped by the generous support of McKinsey & Company—to effect reductions in patient lengths-of-stay and ancillary costs. A crisis-management team, with membership drawn from the medical and surgical disciplines and senior management, was convened to resolve with dispatch any issues that interfere with efficient patient admissions, treatment scheduling, and discharges.

The new system requires us to do more with less, and we've taken that mandate seriously. In 1988, the hospital reduced staff by six percent. Most reductions were achieved by early retirement and attrition rather than employee lay-offs; none involved physicians or nurses. In fact, during 1988, the hospital recruited the largest number of nurses since 1982, over half of whom were experienced practitioners—a testimony to the superior reputation of our nursing division.

In seeking to reduce further the impact of scarce reimbursement resources, the hospital has put in place dozens of innovations geared toward greater efficiency of operation.

- A new telephone system was installed in 1988. It is one component of a totally modernized medical-center communications system, and eliminates the expense of leasing thousands of phones and phone lines. Estimated savings are $1 million a year.
- A powerful computer network now links over 600 terminals with computer systems throughout the medical center. The outcome is the rapid and efficient transmission of laboratory results, other clinical data, and billing information.
- Computerization of the operating-room schedule will simplify and facilitate booking of admissions and operating-room cases for voluntary and full-time surgeons. This will insure the optimum use of surgical facilities and attending-staff time, as well as serve patients better.
- New leasing agreements have enabled us to acquire the latest generations of technical equipment and save money in the process.
- Strengthening the hospital's biomedical-engineering department allows us to reduce repair costs and short-term rental fees.

The combination of staff reductions and operating efficiencies should produce hospital savings of $20 million or more in 1989. With increased patient admissions

and vigorous efforts to obtain the full reimbursement due us from third-party insurers, we expect to reduce our operating deficit by more than 80 percent. These savings estimates are made cautiously. The health-care environment, as it responds to ever-increasing demands, is volatile.

During my first 18 months as president of the hospital, I have been gratified by the high level of cooperation between the hospital's senior management, most of whom are new to their positions, and the clinical-service chiefs, whose intricate knowledge of the hospital's operations has been invaluable. The spirit of candor and excellence in which problems have been analyzed and plans developed continues to be nothing short of magnificent.

Equally exciting have been the advances in research and education achieved by our institutional partner, Cornell University Medical College. The opening of the Lasdon Biomedical Research Center is a landmark for the hospital, as well as the college. It brings the immeasurable benefits of a strong research program to patient care. The hospital's good fortune in having Cornell as a partner was also brought home strikingly last year when the college achieved the highest accreditation rating given to American medical schools. With great pleasure, the hospital congratulates Dr. Tom Shires and the board, staff, faculty and students of the medical college.

The hospital will continue to face great challenges in the coming year. But the ability to meet and overcome challenges is a hallmark of excellence. Government regulatory pressures can make us a stronger institution, provided the regulations are equitable and the pressures not excessive. In the continuing dialogue between health-care providers and government, the New York Hospital will remain a prominent advocate for quality care.

Outside my office window, I can see spring bringing new life to the lovely grounds and gardens of the medical center. It is fitting that a revitalized New York Hospital proceeds into the coming year with renewed vigor and a sense of optimism for the institution's plan for financial correction. The continued cooperation of our board of governors, senior management, physicians and staff gives us all good reason for optimism.

David B. Skinner

David B. Skinner, M.D.
President, The New York Hospital

In December 1988, Cornell University Medical College was visited by a group of educators representing the Liaison Committee on Medical Education, the chief accrediting agency for American medical schools. Although the visit lasted only four days, this was merely the final stage of a process that had begun more than a year earlier. In that time, close to 100 of the college's faculty, students, staff, and board members, under the leadership of Dr. George Reader, chairman of CUMC's department of public health, conducted an exhaustive institutional self-study—a review and evaluation of the programs, resources, and needs of the medical college.

In effect, American medical schools accredit themselves: the institutional self-study, the heart of the accreditation process, identifies both strengths and deficiencies and spells out plans to correct the latter. The reviewers found CUMC's strengths impressive enough and its plans convincing enough to accredit the college for seven years, the longest period for which accreditation is now granted.

Coming near the end of the 1980s, the self-study has provided an occasion to assess some of the major gains achieved in the course of this decade. As the 1980s began, the medical college had real concerns about its fiscal stability, the future of its research programs, and the adequacy of its physical plant. As the decade approaches its conclusion, the college can take pride in the following gains cited in the self-study:

- endowments and funds functioning as endowments up from $41 million to $145 million;
- endowed professorships up from 14 to 44 positions;
- fiscal reserves up from $19 million to $96 million;
- major programs instituted in the fields of cell biology and molecular genetics;
- new construction or renovation of nearly 100,000 square feet of research space.

"The reviewers found CUMC's strengths impressive enough and its plans convincing enough to accredit the college for seven years, the longest period for which accreditation is now granted."

Much of the credit for these and other achievements belongs to Dr. Thomas H. Meikle Jr., who served as dean of the medical college from 1980 to 1987. Dr. Meikle laid the foundation for advances in research and education that the college will be building on for some time.

A major element in this progress is the William and Mildred Lasdon Biomedical Research Center, dedicated in March 1989. When fully occupied, this new building—made possible through a generous leadership gift from Mrs. William Lasdon and her late husband—will increase the college's research space by about 30 percent. All or part of four basic-science departments—biochemistry, pharmacology, physiology and microbiology—will be housed in this new building, along with research laboratories of seven clinical departments. One floor will be devoted to a newly established institute of human neuroscience, where research will be conducted on basic mechanisms involved in multiple sclerosis, stroke, Alzheimer's disease, and major psychoses. Another area will house a laboratory for biological psychiatry, and still another will be set aside for surgical research dealing with cellular responses to burns, trauma, and cancer.

When the medical college embarked in 1986 on the construction of the Lasdon Center, it was with the intention of leaving five shell floors. This approach enabled the college to build its most urgently needed facilities immediately with only part of the overall funding in hand. Now, as those facilities near completion, the college turns its attention to raising $12.5 million to complete the five shell floors.

Current plans look to the development in this space of an institute devoted to studies in molecular biology. New understandings of how cells function at the molecular level—how genes, proteins and other molecules account for a myriad of phenomena

in health and disease—have resulted in some of the most important medical advances of the past several decades. Strengthening the college's research programs in molecular biology will continue to be a high priority as we seek to complete the shell floors and as we look ahead to the construction of a second new research building during the 1990s.

Another striking feature of biomedical research during the past several decades has been the remarkable growth in the number of articles published each year, an increase of about 250 percent since the 1960s and of 2,500 percent since early in the century. Occupying the first two floors of the new research building is the C. V. Starr Biomedical Information Center. Made possible by a $6 million gift from the Starr Foundation, this beautiful facility not only doubles the size of the Samuel J. Wood Library (with its 144,000 volumes and 1,600 medical journals) but considerably expands its computer facilities.

When completed at the end of 1989, the Starr Biomedical Information Center will have over 350 reader work stations, many electronically connected to a cable network linking computers throughout the medical center. Central to this cable system—called a local area network, or LAN—is the library's new VAX 6220 minicomputer, with about twice the storage capability of the library's previous model. Users from throughout the medical center—as many as 64 at a time—will have the potential to access over half a million citations from hundreds of medical journals without ever leaving their offices. Truly, the day of the library without walls is fast approaching.

Computers are also destined to play an increasing role as a learning tool of medical students. For some time educators across the country have been seeking ways to reduce the amount of time devoted to formal lectures in the medical curriculum and to foster alternatives to passive listening. Computers provide an excellent means of self-learning, and since 1985 the college has been developing a new, high-tech educational tool that weds the computer to the interactive laser video disk. Through the leadership of Senior Associate Dean Daniel Alonso, an electronic textbook of pathology has been developed combining three elements—text organized at several layers of detail; 1,200 brilliant full-color illustrations; and abstracts of current articles. The system gives students easy access to a vast amount of information—equal to the contents of scores of books and journals—that is logically organized, cross-referenced and illustrated. Because it takes considerable time to create such a system, current plans look to joint efforts with other medical schools to develop electronic textbooks in other basic sciences. Participating schools would be able to draw on a fully cross-referenced core curriculum, which each school could adapt as it saw fit.

For student use of this technology, the college has set up 18 work stations, each consisting of a microcomputer and video disk system. This is just the beginning: in the coming decade, as the system grows and evolves, 60 more student work stations will be established as part of a new education center to be built on the second floor of the medical college. Costing close to $10 million, this new center will also include 12 new student laboratories—more than double the number now available—as well as a new student auditorium. This education center will embody the goals enunciated in 1985 by the faculty after an extensive review of the college's curriculum: emphasis on self-learning and problem-solving, on small-group teaching, and on opportunities for independent study and research.

While these new technologies and facilities are vital to the future of our educational program, the heart of that program remains our superb faculty—and here too there is good news to report. On January 1, 1989, Dr. John J. Savarese, a pioneer in research on neuromuscular pharmacology during 18 years at Harvard Medical School, became chairman of the department of anesthesiology at the medical college. Replacing the department's retiring chairman, Dr. Joseph Artusio, Dr. Savarese occupies a newly endowed chair named after Dr. Artusio. The college has also been strengthened by the appointment of one of the world's most respected medical educators, Dr. Lewis Thomas, as CUMC's first scholar-in-residence. Dr. Thomas—the former president and chancellor of our affiliate Memorial Sloan-Kettering Cancer Center and the former dean of Yale Medical School—says he looks forward to finding out what's on students' minds, and our students are delighted to have the opportunity to find out what is on his.

As we welcomed these men to the college, the CUMC community was saddened by the untimely deaths of two senior members of the active faculty—Dr. Russell Lavengood, a clinical professor of surgery (urology), and Dr. Robert Selfe, chairman of the department of otorhinolaryngology. Both of these fine teachers are keenly missed.

Critical to our educational programs, too, are our affiliated hospitals, most notably our partner in this medical center, the New York Hospital. In these difficult times for hospitals in general and teaching hospitals in particular, Dr. David Skinner and his senior management faced serious financial problems during 1988. It is a credit to their leadership and to the extraordinary resources of this hospital that in these circumstances there was progress to report in several innovative clinical programs.

"Strengthening the college's research programs in molecular biology will continue to be a high priority . . . during the 1990s."

Prominent among these was NYH/CORNELL AEROMED, the first airborne-ambulance service certified by New York State. Staffed by flight nurses and paramedics and operating 24 hours a day, the AEROMED helicopter can range up to 500 miles to transport injury victims to a hospital or to move a patient from a community hospital to a hospital that has specialized facilities or expertise. From the service's inauguration in May 1988 to mid-December, AEROMED transported 181 patients, of whom 101 were brought to the New York Hospital for admission and 80 transported to other hospitals.

Last year, too, marked the first full year of operation of the New York Children's Health Project, a program inaugurated in November 1987 to bring medical care to homeless children in welfare hotels. Based in NYH-CMC's department of pediatrics, the project sends two mobile medical vans to hotels throughout the city, so that children can receive care from physicians and nurses for illnesses that might otherwise go unattended. Nearly 3,000 children made 6,000 visits to the medical vans during 1988.

In another clinical innovation, an AIDS ambulatory center was established last year to provide comprehensive services for AIDS patients who do not have private physicians. One of the first AIDS treatment units in the city to use a team-care approach, the center seeks to coordinate AIDS care, humanize it, and make it as simple as possible. Meanwhile, AIDS research moves ahead in many laboratories at NYH-CMC.

As these new programs illustrate, the New York Hospital has remained a formidable source of clinical innovation even at a time of financial difficulty—remains, in short, a valued institutional partner in a great medical center.

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The Society of the New York Hospital

January 1—
December 31, 1988

Revenues	$ Millions	%
Net Inpatient Revenue	317.0	83.6
Net Outpatient Revenue	38.8	10.2
Other Operating Revenue	15.3	4.1
Specific-Purpose Funds Used to Support Current Operations	8.0	2.1
Total	379.1	100.0%
Expenses		
Salaries, Wages and Benefits	260.0	59.6
Medical and Surgical Supplies, Pharmaceuticals & Other Expenses	103.8	23.8
Medical Malpractice and Other Insurance	16.0	3.7
Depreciation, Interest, Leases and Amortization	56.5	12.9
Total	$436.3	100.0%
Operating Loss	$57.2	
Investment Income and Unrestricted Gifts	$33.4	
Expenses in Excess of Revenues	$23.8	

Cornell University Medical College

July 1, 1987—
June 30, 1988

Revenues	$ Millions	%
Tuition and Fees	7.8	4.2
Investment Income	10.4	5.5
Restricted Funds for Research and Training	53.0	28.3
State Appropriation	1.2	0.6
Indirect Cost Reimbursement	9.4	5.0
Faculty Practice Plan	98.6	52.6
Other Sources	7.1	3.8
Total Revenues:	$187.5	100.0%
Expenses		
Instruction and Research Training	13.1	7.0
Research	40.4	21.5
Libraries and Academic Support	3.6	1.9
Student Services and Student Financial Aid	6.2	3.3
General and Administrative Support	10.9	5.9
Plant Operations	7.3	3.9
Faculty Practice Plan	90.0	48.0
Debt Service	1.0	0.5
Other Expenses and Transfers	15.0	8.0
Total Expenditures:	$187.5	100.0%

STATISTICAL SUMMARY 1988

Services to Patients	Laboratory	2,994,020
	Blood Bank	203,921
	Radioisotopes Services	46,072
	X-Ray Examinations	128,271
	Operations	21,263
	Deliveries	3,402
	Electrocardiograms	80,896
	Electroencephalograms	3,021
	Social Services Interviews	387,800
	Therapy Treatments (Physical, Occupational, Recreational)	273,102
	Transfusions	35,621
	Pharmacy Prescriptions	2,287,745
	Record Room-New Case Records	52,702
	Average Number of Full-Time Employees	6,242.0
Distribution of Beds	**Private**	
	Baker-Medicine	78
	Baker-Surgery	39
	Obstetrics and Gynecology	29
	Pediatrics	5
	Total Private	151
	Semi-Private	
	Medical/Surgical	485
	Two-Bed Baker-Medicine	57
	Two-Bed Baker-Surgery	31
	Urology	61
	Obstetrics and Gynecology	96
	Pediatrics	107
	Total Semi-Private	837
	Sub-Total Manhattan Division	988
	Newborn Bassinets	44
	Payne Whitney Clinic	108
	Total Manhattan Division	1,140
	The Westchester Division	322
	Grand Total	1,462
Patient Care	Patients Admitted Manhattan Division	34,085
	Newborn	3,463
	Payne Whitney Psychiatric Clinic	1,154
	The Westchester Division	1,414
	Total	40,116
	Patient Days, All Divisions Including Newborn	450,113
	Visits to Day Hospital	10,469
	Visits to Outpatient Clinics	160,114
	Visits to Emergency Pavilion	45,605

Educational Program

Medical Students	400
Graduate Students	172
M.D.-Ph.D. Students *(medical and graduate enrollments)*	65
Degrees Conferred *(1987-88 academic year)*	121
M.D.	97
Ph.D.	24
Faculty *(including all affiliates—1987-88 academic year)*	2,931
Full-Time	1,242
Part-Time	117
Voluntary	1,572
House Staff *(NYH-CMC only)*	478
Health-Related Students:	
Dental Hygienists	1
Dietetic Interns	15
Medical Social Workers	11
Surgical Assistants	24
Samuel J. Wood Library *(1987-88 academic year)*	
Visits	368,702
Journals (titles)	1,717
Total Volumes	144,438
New Books Received	1,645

Profile of Entering Medical Students September 1988

(101 admitted out of total applicant pool of 4,585)

Men	59
Women	42
Minorities	17
New York State Residents	51
College Majors	Science (77); Non-Science (24)
Mean Grade Point Average	3.5
Average Age	22.6
Age Range	20-33

Universities with Three or More Graduates Admitted:

Cornell	25	Princeton	4
Harvard	7	Johns Hopkins	4
Stanford	5	Williams	4
Univ. of Pennsylvania	5	Haverford	3
Yale	5	Brown	3

Research

(July 1, 1987—June 30, 1988)

Federally Sponsored Research *(including fellowship and research training)*—Total Funding	$40,209,830
Privately Sponsored Research—Total Funding	$20,475,275
Research Projects Funded—New and Renewals	366

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Auxiliary

The auxiliary began as the Social Services Committee, founded in 1912 by the wives of three hospital governors. As its activities expanded beyond social service, the committee became the Women's Auxiliary of the Society of the New York Hospital and later simply the "auxiliary."

During the past year, the auxiliary donated $230,000 to the New York Hospital and to hospital community projects. Income was derived from contributions, membership dues, television rentals, and sales at the auxiliary's gift shop in the hospital lobby and its thrift shop at 439 East 71st Street.

Major donations went to the following programs:

• Teenage Pregnancy and Parenting Program. This joint effort of the departments of obstetrics and gynecology and public health addresses the detrimental effects of teenage pregnancy with a comprehensive approach focusing on prenatal obstetrical care, personal counseling, and medical follow-up for both mother and child. A primary objective is to help the teenager avoid subsequent pregnancies by encouraging and nurturing other personal goals and ambitions.

• Benefit Eligibility Check-Up Program. Developed by the department of social work, in conjunction with the Lenox Hill Neighborhood Association and the Living at Home Program, this community-outreach project provides information to elderly persons on their eligibility for local, state, and federal benefits. Most older adults do not have all the benefits to which they are entitled. Using newly developed software, this program matches individuals and benefits on the basis of a brief application form.

• Child Abuse Program. This pediatric service gathers evidence, orders tests, and conducts consultations to piece together scenarios of child abuse. When appropriate, the unit reports its findings to city authorities and provides testimony in court.

The auxiliary continues to fund publication of a quarterly newsletter that appears in the newspaper *Our Town*, contributes to the Volunteer Services for the Elderly of Yorkville, and helps support the New York Hospital child-life department.

Volunteers

Nineteen eighty-nine marks the 40th anniversary of the volunteer-services department of the New York Hospital. In 1949, when a volunteer worked in the hospital, she was viewed as a "lady bountiful," a woman of leisure and means who gave her time to the institution.

Today volunteers come from every walk of life. They include teenagers and seniors, men and women, students and professionals, single mothers on public assistance who want to acquire marketable skills, retired nurses, people exploring a career change, and individuals from foreign countries who are not permitted to work for pay.

In 1988, 535 volunteers gave 54,307 hours in 107 different assignments, contributing not only their time and talent but the compassion and caring that mean so much to patients. One hundred nineteen of our volunteers were cited early in 1989 by the United Hospital Fund and the New York Hospital for extended service. Awards for longest service were as follows:

35 years
Marilyn Graves

25 years
Caroline Winn

20 years
Jean Barr

15 years
Kathryn Oppenheimer
Angeline Schillaci

10 years
Paul Epstein

5 years
Yetta Brown
Lois Kaufmann
Susan Loesser
Claire Meyerowitz
Maria Mironov
Sophie Oriel
Josephine Pecorino
Lillian West

6,000 hours
Georgette Falco
Tess Sarnoff

5,000 hours
Lollo Erda
Evelyn Huntman

4,000 hours
Ruth Livingston

3,000 hours
Anne Kolinko
Julie Price

2,000 hours
Audrey Aronson
Barbara Booth
Charles Diamond
Elizabeth Handler
Fréderika Heinemann
Evelyn Schwartz

The New York Hospital–Cornell Medical Center represents an affiliation of the New York Hospital and Cornell University Medical College. Physicians at the medical center have appointments in both institutions.

Chiefs of service at the New York Hospital, with the exception of the physiatrist-in-chief, serve as chairmen of corresponding clinical departments of Cornell University Medical College. Physicians at the hospital have faculty appointments in the medical college. For the sake of simplicity, however, the center's clinical faculty are listed here by their hospital titles only and not by their academic titles.

In addition to the clinical departments, the center also has six basic-science departments. Since the work of these departments consists almost entirely of teaching and research, many basic-science faculty do not have hospital appointments. They are, therefore, listed here by academic title.

The medical center has affiliations with a number of institutions, including the Hospital for Special Surgery, the Burke Rehabilitation Center, Memorial Sloan-Kettering Cancer Center, North Shore University Hospital, Catholic Medical Center of Brooklyn and Queens, Lenox Hill Hospital, St. Barnabas Hospital, the Will Rogers Institute, and LaGuardia Hospital. Because of space limitations, professional staff at these institutions who do not have New York Hospital appointments are not listed in the following pages.

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(January 1, 1989)

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Judy A. C. Hlawitschka, M.D.
Yveline Danielle Jean-Clause, M.D.
Steven Kaplan, M.D.
Ruth-Anne Kelly, M.D.
Brian L. Kelsall, M.D.
Roger S. Keresztes, M.D.
Walter A. Klein, M.D.
Jay A. Ladenheim, M.D.
Christine A. Laine, M.D.
Richard I. Lappin, M.D.
Howard R. Levin, M.D.
Howard M. Likier, M.D.
Neal Lippman, M.D.
Manuel B. Litchman, M.D.
Carol Mancuso, M.D.
David B. Messinger, M.D.
Jean E. Mulder, M.D.
Richard E. Nickowitz, M.D.
Andrew J. Porges, M.D.
Shahin Rafii, M.D.
Steven L. Reiner, M.D.
Antoinette E. Robinson, M.D.
Elisabeth L. Rosenthal, M.D.
Elaine J. Schattner, M.D.
Elana G. Schrader, M.D.
Mindy G. Schuster, M.D.
Robert A. Seder, M.D.
Rampaul G. Singh, M.D.
Kenneth M. Stein, M.D.
Nicholas D. A. Suite, M.D.
Cheryl R. Singer Talpalar, M.D.
Michael R. Tendler, M.D.
Terence K. Trow, M.D.
Paul S. Unger, M.D.
David J. Vaughn, M.D.
Barbara A. Wismer, M.D.
Todd J. Yancey, M.D.
Gary Zagon, M.D.

Interns
Karen L. Ashby, M.D.
Lisa F. Baron, M.D.
Robert D. Blank, M.D., Ph.D.
Bradford A. Bottger, M.D.
Frederick M. Briccetti, M.D.
Josepha Bueno, M.D.
Matthew R. Caleb, M.D.
David J. Chang, M.D.
Jack P. Chen, M.D.
Ronald D. Chervin, M.D.
James S. Cornell, M.D., Ph.D.
Jonathan David, M.D.
Jose' M. Dizon, M.D.
Dean Eliott, M.D.
Rene S. Eng, M.D.
Karen B. Green, M.D.
Erminia M. Guarneri, M.D.
William S. Hauptman, M.D.
Robert M. Hitscherich, M.D.
Michael L. Holdeman, M.D.
Michael C. Levin, M.D.
Richard A. Lewis, M.D.
Steven J. Lobritto, M.D.
Frank H. Lovaglio, M.D.
Steven M. Markowitz, M.D.
Susan Markush, M.D.
Randolph S. Marshall, M.D.
Samuel T. Merrick, M.D.
Mehrdad Moasser, M.D.
Frederick A. Nunes, M.D.
Cheryl B. Pegus, M.D.
Mark B. Pochapin, M.D.
Gail M. Riess, M.D.
Richard F. Scofield, M.D.
Michael G. Sension, M.D.
Paul A. Sidoti, M.D.
Craig A. Sukin, M.D.
Megan Mae Terwilliger, M.D.
John A. Venditto, M.D.
Suzanne B. Weiner, M.D.
Neil J. Weissman, M.D.
David T. Wong, M.D., Ph.D.

Assistant Physicians (Dermatology)
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Mitchell A. Kline, M.D.
James G. Krueger, M.D.
Ramsay S. Kurban, M.D.
Alison C. Lindsay-Beltzer, M.D.
Loretta A. Pratt, M.D.
Margo L. Weishar, M.D.
John C. Werber, M.D.

Neurology

Medical Staff

Neurologist-in-Chief
Fred Plum, M.D.

Attending Neurologists
Richard Beresford, M.D.
Ira B. Black, M.D.
John P. Blass, M.D., Ph.D.
John J. Caronna, M.D.
Kathleen M. Foley, M.D.
Fletcher H. McDowell, M.D.
Hart de C. Peterson, M.D.
Jerome B. Posner, M.D.
William A. Pulsinelli, M.D. Ph.D.
William R. Shapiro, M.D.

Associate Attending Neurologists
Joshua Adler, M.D.
Raymond H. Coll, M.D.
Thomas C. Guthrie, M.D.
Mark S. Horwich, M.D.
Gerald H. Klingon, M.D.
Henn Kutt, M.D.
David E. Levy, M.D.
Gavril W. Pasternak, M.D., Ph.D.
Frank A. Petito, M.D.
Richard W. Price, M.D.
John A. Schaefer, M.D.
Gail E. Solomon, M.D.
Peter Tsairis, M.D.
Jonathan D. Victor, M.D., Ph.D.
Bruce T. Volpe, M.D.
Philip H. Zweifach, M.D.

Assistant Attending Neurologists
Ronald S. Black, M.D.
Jesse M. Cedarbaum, M.D.
Lisa M. DeAngelis, M.D.
Michelle E. Ehrlich, M.D.
Steven A. Goldman, M.D.
Michael Jacewicz, M.D.
Douglas R. Labar, M.D., Ph.D.
Mark Malkin, M.D.
Joelle Mast, M.D.
Ruth D. Nass, M.D.
Nancy M. Nealon, M.D.
Charles P. Pollak, M.D.
Russell K. Portenoy, M.D.
Samuel Rapoport, M.D.
Michael Rubin, M.D.
Leonard S. Schleifer, M.D., Ph.D.
Daniel R. Wagner, M.D.
Russell W. Walker, M.D.

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Gilbert Gonzales, M.D.
John W. Henson, M.D.
Jack S. Jacobs, M.D.
Barry D. Jordan, M.D.
Bruce A. Kaplan, M.D.
Herbert B. Newton, M.D.
Susan V. Szapiel, M.D.

Neurologists
Geoffrey J. Arlt, M.D.
Alexander P. Auchus, M.D.
Victor M. Erlich, M.D.
James B. Leverenz, M.D.
Kenneth Maiese, M.D.

Assistant Neurologists
Richard W. Adams, M.D.
Susan B. Cohen, M.D.
Robert B. Darnell, M.D., Ph.D.
Costantino Iadecola, M.D.
Ellen E. Mack, M.D.
Jeffrey B. Reich, M.D.
Norman R. Relkin, M.D.
Jonathan D. Root, M.D.
David A. Silbersweig, M.D.
Christine R. Wells, M.D.
Meng C. Wong, M.D.

Obstetrics and Gynecology

Medical Staff

Obstetrician- and Gynecologist-in-Chief
William J. Ledger, M.D.

Attending Obstetricians and Gynecologists
Stanley J. Birnbaum, M.D.
Myron I. Buchman, M.D.
Thomas A. Caputo, M.D.
E. William Davis Jr., M.D.
William P. Given, M.D.
Walter B. Jones, M.D.
John L. Lewis Jr., M.D.
Frederick W. Martens, M.D.
Joseph N. Nathanson, M.D.
Zev Rosenwaks, M.D.
Richard A. Ruskin, M.D.
S. Francis Ryan, M.D.
Frederick Silverman, M.D.
E. Thomas Steadman, M.D.
William J. Sweeney III, M.D.

Associate Attending Obstetricians and Gynecologists
Ernst G. Bartsich, M.D.
Alan S. Berkeley, M.D.
Alfred Brockunier Jr., M.D.
Ronald M. Caplan, M.D.
Lars L. Cederqvist, M.D.
Frank A. Chervenak, M.D.
Jerome G. Davis, M.D.
Maurice L. Druzin, M.D.
William J. Hoskins, M.D.
Bernard N. Nathanson, M.D.
Desider J. Rothe, M.D.
Attila Toth, M.D.
William D. Walde, M.D.
Robert E. Wieche, M.D.

Associate Attending Psychiatrist
John M. Astrachan, M.D.

Assistant Attending Obstetricians and Gynecologists
Patricia Yarberry Allen, M.D.
Robert G. Armbruster, M.D.
Thomas J. Armbruster, M.D.
Scott H. Bailey, M.D.
Naef K. Basile, M.D.
Anne T. Carlon, M.D.
Deborah M. Cerar, M.D.
Ina N. Cholst, M.D.
Patricia Conrad, M.D.
Kathryn A. Cox, M.D.
Lawrence E. Cutler, M.D.
Owen K. Davis, M.D.
Sona I. Degann, M.D.
Richard J. Derman, M.D.
Sally Faith Dorfman, M.D.
Vincent du Vigneaud Jr., M.D.
Terri Edersheim, M.D.
George B. Feldman, M.D.
Joseph Finkelstein, M.D.
Wilma Gladstone, M.D.
Margaret J. Graf, M.D.
Martin Gubernick, M.D.
Enayat Hakim-Elahi, M.D.
Marcia A. Harris, M.D.
J. Milton Hutson, M.D.
Edward I. Jacobson, M.D.
David F. James, M.D.
Radoslav Jovanovic, M.D.
Robert E. Kaye, M.D.
Joan L. Kent, M.D.
Alan A. Kessler, M.D.
Katherine LaGuardia, M.D.
Nancy B. Lebowitz, M.D.
Louis J. Lissak, M.D.
Robert N. Melnick, M.D.
Edward K. C. Mok, M.D.
Amen Ness, M.D.
Gideon G. Panter, M.D.
Joseph I. Paris, M.D.
Reginald T. Puckett, M.D.
David M. Roth, M.D.
Stephen C. Rubin, M.D.
Zoltan I. Saary, M.D.
Robert I. Sassoon, M.D.
Ida Ellen Schwab, M.D.
Gara M. Sommers, M.D.
Michael J. Strongin, M.D.
Fouad Surur, M.D.
Yvonne S. Thornton, M.D.
Miklos Toth, M.D.
David B. Weinstein, M.D.

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Obstetricians and Gynecologists
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Nicole D. Davis, M.D.
Andrea M. Dobrenis, M.D.
Barbara E. Gardner, M.D.
Gary H. Goldman, M.D.
Garrick H. Leonard, M.D.
Beth G. Marcaccio, M.D.
Joan M. Mastrobattista, M.D.
Hanne T. Meiland, M.D.
Nicole L. Noyes, M.D.
Mary Lee Rivera, M.D.
Jessica Rosenberg, M.D.
David B. Sable, M.D.
Laura Schiller, M.D.
Audrey M. Seidel, M.D.
Peter T. Simonson, M.D.
Robert L. Steer, M.D.
Judith C. Wenger, M.D.

Ophthalmology

Medical Staff

Ophthalmologist-in-Chief
D. Jackson Coleman, M.D.

Attending Ophthalmologists
David H. Abramson, M.D.
William C. Cooper, M.D.
Robert M. Ellsworth, M.D.
Ira H. Kaufman, M.D.
Harvey A. Lincoff, M.D.
Alfred E. Mamelok, M.D.
Walter L. Peretz, M.D.
Richard C. Troutman, M.D.
Philip H. Zweifach, M.D.

Associate Attending Ophthalmologists
Stephen E. Bloomfield, M.D.
Stanley Chang, M.D.
Thomas D. Cherubini, M.D.
Laurence S. Harris, M.D.
David B. Karlin, M.D.
Peter L. Laino, M.D.
Richard S. Muchnick, M.D.
Peter M. Odell, M.D.
David Paton, M.D.
Calvin W. Roberts, M.D.
James S. Schutz, M.D.
Michael B. Starr, M.D.
Suzanne Veronneau, M.D.
Michael E. Yablonski, M.D.

Assistant Attending Ophthalmologists
Dianne Aronian, M.D.
Barry M. Belgorod, M.D.
Sandra C. Belmont, M.D.
Scott E. Brodie, M.D.
Andrew W. Danyluk, M.D.
Vincent P. deLuise, M.D.
Martin Ehrenberg, M.D.
Yale L. Fisher, M.D.
Scott H. Greenstein, M.D.
Judith E. Gurland, M.D.
Gregory K. Harmon, M.D.
Murk-Hein Heinemann, M.D.
Yaffa Kahanowicz, M.D.
Marlene R. Krauss, M.D.
Rosemarie Fusco Marks, M.D.
Norman B. Medow, M.D.
Robert F. Munsch, M.D.
(leave of absence)
David B. Pearce, M.D.
Thomas A. Poole, M.D.
Vincent S. Reppucci, M.D.
Olivia N. Serdarevic, M.D.
Jesse Sigelman, M.D.
Kathleen S. Stern, M.D.
Robert R. Strome, M.D.
Timothy P. Sullivan, M.D.
James W. Talbot, M.D.
Robert A. Weiss, M.D.
Wayne G. Whitmore, M.D.
Dean J. Yimoyines, M.D.

Professional-Associate Staff

Physician's Assistant
Lynn Higgins

Graduate Staff

Clinical Fellows
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Jeffrey D. Zheutlin, M.D.

Ophthalmologist
David T. Garrett, M.D.

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Patrick H. Dennis Jr., M.D.
Gregory J. Faust, M.D.
Robert A. Flores, M.D.
Thomas E. Flynn, M.D.
G. Philip Matthews, M.D., Ph.D.
Debra Lea Morrison, M.D.
Michael B. Rivers, M.D.
Joseph P. Shovlin, M.D.

Otorhinolaryngology

Medical Staff

Acting Otorhinolaryngologist-in-Chief
W. Shain Schley, M.D.

Attending Otorhinolaryngologists
James A. Moore, M.D.
Simon C. Parisier, M.D.
Roy B. Sessions, M.D.

Associate Attending Otorhinolaryngologists
Thomas C. McLure III, M.D.
Norman J. Pastorek, M.D.
W. Shain Schley, M.D.

Assistant Attending Otorhinolaryngologists
Vijay K. Anand, M.D.
Anthony DeGennaro, M.D.
Lloyd R. Dropkin, M.D.
David R. Edelstein, M.D.
William F. Flynn, M.D.
Milton Ingerman, M.D.
Alvin Katz, M.D.
Inocencio C. Kho, M.D.
Samuel Nodelman, M.D.
Robert C. Wang, M.D.
Robert F. Ward, M.D.

Assistant Attending Pediatrician
Gary J. Noel, M.D.

Graduate Staff

Assistant Otorhinolaryngologists
Andrew G. Berman, M.D.
Norman Holzberg, M.D.
Matthew J. Kates, M.D.

Pathology

Medical Staff

Pathologist-in-Chief
John T. Ellis, M.D.

Attending Pathologists
Daniel R. Alonso, M.D.
Carl G. Becker, M.D.
Frederick A. Jakobiec, M.D.
Aaron Kellner, M.D.
Elmer E. Kramer, M.D.
N. Scott McNutt, M.D.
Myron R. Melamed, M.D.
C. Richard Minick, M.D.
Janet A. Mouradian, M.D.
Carol K. Petito, M.D.
Charles A. Santos-Buch, M.D.
Carl F. W. Wolf, M.D.

Associate Attending Pathologist
Peter G. Bullough, M.D.

Assistant Attending Pathologists
M. Lita Alonso, M.D.
James B. Amberson, M.D.
Brian K. Chamides, M.D.
Adolfo Firpo-Betancourt, M.D.
Thomas A. Godwin, M.D.
Winston G. Harrison, M.D.
June H. Koizumi, M.D.
Margret L. S. Magid, M.D.
Susan Morgello, M.D.
William A. Muller, M.D., Ph.D.
George Niedt, M.D.
Powers Peterson, M.D.
Philip G. Prioleau, M.D.
Joseph L. Rayburn, M.D.
Deborah S. Schron, M.D.
Bruce R. Smoller, M.D.
Annie M. Strupp, M.D.

Professional-Associate Staff

Professional Associates
Raju S. K. Chaganti, Ph.D.
Renate F. Klein, Ph.D.
Laurence B. Senterfit, Sc.D.

Graduate Staff

Assistant Pathologist (Dermatopathology)
Mark H. Gray, M.D.

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Kevin L. Cash, M.D.
Yao-Tseng Chen, M.D.
Chris E. Chernesky, M.D.
Ian Scott Cornell, M.D.
Steven M. Erde, M.D. Ph.D.
Juan C. Felix, M.D.
Priscilla I. Figueroa, M.D.
Sarah S. Frankel, M.D.
Laura S. Hair, M.D.
Daniel E. Melamed, M.D.
Geraldine A. Mercer, M.D.
Gerald Minkowitz, M.D.
Jodi S. Singer, M.D.
Jonathan R. Zirn, M.D.

Interns
Eileen M. Burrows, M.D.
Andrew B. Kanik, M.D.
Kathleen D. Whitney, M.D.

Pediatrics

Medical Staff

Pediatrician-in-Chief
Maria I. New, M.D.

Attending Pediatricians
Peter A. M. Auld, M.D.
Kathryn H. Ehlers, M.D.
Mary Allen Engle, M.D.
James L. German III, M.D.
Margaret W. Hilgartner, M.D.
Alfred N. Krauss, M.D.
Aaron R. Levin, M.D.
Florence N. Marshall, M.D.
Rebecca F. Notterman, M.D.
Richard J. O'Reilly, M.D.
George M. Owen, M.D.
Hart de C. Peterson, M.D.
Irwin Rappaport, M.D.
Alfred L. Scherzer, M.D.
Mervin Silverberg, M.D.
David I. Smith, M.D.
Charlotte T. C. Tan, M.D.

Attending Psychiatrist
Theodore Shapiro, M.D.

Attending Radiologist
Patricia Winchester, M.D.

Associate Attending Pediatricians
Richard R. Bass, M.D.
Arthur E. Brown, M.D.
James B. Bussel, M.D.
Benedict S. Caterinicchio, M.D.
Leon I. Charash, M.D.
Fredric Daum, M.D.
Jessica G. Davis, M.D.
Alan P. DeMayo, M.D.
Paul J. Edelson, M.D.
Alvin N. Eden, M.D.
Murray Engel, M.D.
John J. Ferry Jr., M.D.
Zulema Fischbarg, M.D.
William W. Frayer, M.D.
Joseph M. Gertner, M.B., B.Ch.
Fereshteh Ghavimi, M.D.
Patricia-Jane Giardina, M.D.
Fred Gilbert, M.D.
Arthur A. Klein, M.D.
Thomas J. A. Lehman, M.D.
Rudolph L. Leibel, M.D.
Ralph I. Lopez, M.D.
Andrea Marks, M.D.
Paul A. Meyers, M.D.
Virginia C. Mitty, M.D.
Ruth D. Nass, M.D.
Karl Neumann, M.D.
Bertrand L. New, M.D.
John E. O'Loughlin, M.D.
Irwin E. Redlener, M.D.
Melvin S. Rosh, M.D.
Ingrid K. Rosner, M.D.
Myles S. Schiller, M.D.
William T. Seed, M.D.
Gail E. Solomon, M.D.
Josef Soloway, M.D.
William Spivak, M.D.
Laurel J. Steinherz, M.D.
Peter G. Steinherz, M.D.

Associate Attending Radiologist
Paula W. Brill, M.D.

Assistant Attending Pediatricians
Christine A. Avery, M.D.
Paul M. Baker, M.D.
Isis A. Bartels, M.D.
Sabina Bizzoco, M.D.
Diane E. Bloomfield, M.D.
Marjorie A. Boeck, M.D., Ph.D.
Rence M. Brilliant, M.D.
Joel A. Brochstein, M.D.
Jeffrey L. Brown, M.D.
Karen A. Burke, M.D.
Stephen Burstein, M.D., Ph.D.
Brenda I. Caparros-Sison, M.D.
Ralph E. Caprio, M.D.
Carmela R. Carpanzano, M.D.
Dennis T. Costakos, M.D.
Barbara Ann Dash, M.D.
Barbara A. Dennison, M.D.
Ann Di Maio-Hunter, M.D.
Isabelle Dieudonne-Eid, M.D.
Miles H. Dinner, M.D.
John A. Distasio, M.D.
Margaret Kelly Downey, M.D.
Gary E. Eddey, M.D.
Gloria T. Edis, M.D.
Michelle E. Ehrlich, M.D.
Nunzia Fatica, M.D.
Michael P. Fitzgerald, M.D.
Kira A. Geraci-Ciardullo, M.D.
Alfred P. Gillio III, M.D.
Michael A. Giuliano, M.D.
Diane M. Gocs, M.D.
Leonard T. Goslee, M.D.
Eric F. Grabowski, M.D.
Armando E. Grassi, M.D.
Elizabeth A. Greenfield, M.D.
Walter B. Greenfield, M.D.
Bruce M. Greenwald, M.D.
Katherine A. Hajjar, M.D.
Madeleine D. Harbison, M.D.
Stephen P. Herman, M.D.
Christina Hift, M.D.
Kenneth J. Higgins, M.D.
Paul Horowitz, M.D.
Ajey Jain, M.D.
Valerie L. Johnson, M.D.
Stewart Kaplan, M.D.
Katherine J. Karlsrud, M.D.
Timothy H. Kenefick, M.D.
Nancy A. Kernan, M.D.
Bradley H. Kessler, M.D.
Daniel B. Kessler, M.D.
Smita R. Kumar, M.D.
Brian Kushner, M.D.
Barbara A. Laboard, M.D.
Alberto Lacoius-Petruccelli, M.D.
Howard Lantz, M.D.
Nina Louie Lau, M.D.
Joseph Laver, M.D.
Uri Lavy, M.D.
Michael L. Lewin, M.D.
Roy H. Lieberman, M.D.
Evelyn G. Lipper, M.D.
Nancy T. Mallon, M.D.
Joelle Mast, M.D.
Irma M. Matos-Rivera, M.D.
Reginald D. McLaughlin, M.D.
Richard G. Merkler, M.D.
Marie-Jacqueline Moises, M.D.
Elliot M. Newhouse, M.D.
Meryl F. Newman-Cedar, M.D.
Gary J. Noel, M.D.
Daniel A. Notterman, M.D.
Vicki Anne Papadeas, M.D.
Dorothy M. Pietrucha, M.D.
Edna Anne Pytlak, M.D.
Arlene Redner, M.D.
Reuben H. Reiman, M.D.
Roy J. Rodrigues, M.D.
Michael Rosenbaum, M.D.
Andrew S. Rosenblum, M.D.
Suzanne Rosenfeld, M.D.
Deborah Sanders-Laufer, M.D.
Emily A. Schmalzer, M.D.
Marjorie Schulman, M.D.
Alina A. Serdakowska, M.D.
Beverly A. Sheppard, M.D.
Donald R. Skog, M.D.
Cecelia A. Slater, M.D.
Trudy N. Small, M.D.
Barbara K. Snyder, M.D.
Michael S. Snyder, M.D.
Barney Softness, M.D.
Phyllis W. Speiser, M.D.
Gerald M. Spielman, M.D.
Joel Steckelman, M.D.
Ralph Stein, M.D.
Mitchell A. Stevens, M.D.
Elizabeth Stoner, M.D.
Jerzy A. Szatkowski, M.D.
Mary Y. Y. Tsai, M.D.
Russell W. Walker, M.D.
David J. Weinstock, M.D.
Adrienne L. Weiss-Harrison, M.D.
Janet M. Werkmeister, M.D.
Donna E. Wiener, M.D.
Victor M. Zayas, M.D.
Michele Zerah, M.D.
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Assistant Attending Psychiatrist
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Clinical Affiliates
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Diane B. Gareen, M.D.
Albert C. Holtzman, M.D.
Lisa Cooper Hudgins, M.D.
Elizabeth T. Khuri, M.D.
Phyllis S. Landau, M.D.
Robert H. Lustig, M.D.
Robert Rapaport, M.D.
Ladd Spiegel, M.D.
Ernest B. Visconti, M.D.
Perrin C. White, M.D.
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Professional-Associate Staff

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Graduate Staff

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Paul T. Jubinsky, M.D., Ph.D.
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Susan Lee, M.D.
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Francis M. Moran, M.D.
F. Harry Moreau, M.D.
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Marie E. John, M.D.
Stacey Kaplan, M.D.
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Psychiatry

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Eric T. Carlson, M.D.
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Lawrence Friedman, M.D.
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Sheldon Gaylin, M.D.
James G. Gibbs Jr., M.D.
Ira D. Glick, M.D.
Sidney S. Goldensohn, M.D.
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Katherine A. Halmi, M.D.
Jimmie C. B. Holland, M.D.
Helen S. Kaplan, M.D.
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J. John Mann, M.D.
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Robert B. Millman, M.D.
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Hyam Bolocan, M.D. (leave of absence)
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E. Gerald Dabbs, M.D.
Andre Dupuis, M.D.
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Lisa Tallal, M.D.
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Steven J. Wein, M.D.
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John A. Ramsdell, M.D.
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Michael B. Saul, D.M.D.
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Mary Sickles, M.D.
Howard B. Simon, M.D.
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Mae S. Sokol, M.D.
Ladd Spiegel, M.D.
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(leave of absence)
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Carol W. Weinstein, M.D.
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Clinical Affiliate (Orthopedic Surgery)
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Professional-Associate Staff

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John F. Clarkin, Ph.D.
Herbert Fensterheim, Ph.D.
Walter Kass, Ph.D.
Lee Salk, Ph.D.
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Gilbert J. Botvin, Ph.D.
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Stephen W. Hurt, Ph.D.
Herbert H. Krauss, Ph.D.
Jay S. Kwawer, Ph.D.
(leave of absence)
Bernard Landis, Ph.D.
Ruth F. Lax, Ph.D.
Armand W. Loranger, Ph.D.
Steven Mattis, Ph.D.
Melvin Muroff, Ph.D.
Michel Radomisli, Ph.D.
William H. Redd, Ph.D.
John M. Ross, Ph.D.
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Muriel C. Winestine, Ph.D.
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Assistant Attending Psychologists
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William H. Berman, Ph.D.
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Susan Bram, Ph.D.
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Audrey J. Clarkin, Ph.D.
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Peter Deri, Ph.D.
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Katie Eisenstadt, Ph.D.
Jerome L. Fine, Ph.D.
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Mary M. Fitzpatrick, Ph.D.
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George J. Makari, M.D.
Rocco F. Marotta, M.D.
David A. Mitnick, M.D.
Mitchell D. Newmark, M.D.
Ann B. Oribe, M.D.
Robert J. Penzer, M.D.
Karen Jeanne Prowda, M.D.
Eva C. Ritvo, M.D.
Robert A. Root, M.D.
Kenneth P. Rosenberg, M.D.
Diane C. Rudolph, M.D.
Elissa M. Sanders, M.D.
Charles Silberstein, M.D.
Lisa Sombrotto, M.D.
Margaret Gail Spinelli, M.D.
Judith Hertz Tanenbaum, M.D.
Helen Tierney, M.D.
Carol J. VanderZwaag, M.D.
Audrey M. Walker, M.D.
Martin Wilner, M.D.
Caryl E. Yanow, M.D.

Graduate Staff—Westchester Division

Clinical Fellows
Bryan V. Boffi, M.D.
Mark A. Scher, M.D.

Psychiatrist
Mark E. Servis, M.D.

Assistant Psychiatrists (Child Psychiatry)
Birgit K. Elias, M.D.
Emanuel John Falcone Jr., M.D.
Taryn Fishman, M.D.
Gregory T. Lombardo, M.D.
Henry P. Schwartz, M.D.
Valerie A. N. Shell, M.D.

Assistant Psychiatrists
Carol L. Alter, M.D.
Jeffrey D. Bedrick, M.D.
Beth M. Belkin, M.D., Ph.D.
Hope Berkeley, M.D.
Betsy Jo Bittman, M.D.
Devra Braun, M.D.
Cathy Canepa, M.D.
Sara A. Cartmell, M.D.
Janis Chester, M.D.
Deborah A. Deliyannides, M.D.
Richard A. Flamberg, M.D.
Eric M. Grabstein, M.D.
Frances Gaines Haxton, M.D.
Nancy C. Horowitz, M.D.
Lawrence Kelmenson, M.D.
Charles C. Kim, M.D.
Sonia O. Kulchycky, M.D.
Alexander C. L. Lerman, M.D.
Julio Licinio, M.D.
Ruth Held Martin, M.D.
Gregory A. Miller, M.D.
Danielle Murstein, M.D.
Helen C. Panarites, M.D.
David Pelino, M.D.
Brian D. Poeschla, M.D.
Carla M. Polcyn, M.D.
Burton Presberg, M.D.
Ilene Rabinowitz, M.D.
Charles P. Ramesar, M.D.
Steven J. Romano, M.D.
Ellen K. Schlefer, M.D.
Tara L. Sherman, M.D.
Bennett L. Solnick, M.D.
Robert J. Solomon, M.D.
Madeleine Stam, M.D.
Anthony J. Stern, M.D.
Denise Szczucki, M.D.
Bradford M. Tepper, M.D.
Mariann Turato, M.D.
L. Adele West, M.D.
Barbara E. Ziv, M.D.

Radiology

Medical Staff

Radiologist-in-Chief
Joseph P. Whalen, M.D.

Attending Radiologists
Mostafa A. Batata, M.D.
David V. Becker, M.D.
Yahya M. Berkmen, M.D.

Florence Chien-Hwa Chu, M.D.
Michael D. F. Deck, M.B.,B.S.
John A. Evans, M.D.
Robert H. Freiberger, M.D.
Amy Beth Goldman, M.D.
David B. Hayt, M.D.
Jeremy J. Kaye, M.D.
Elias Kazam, M.D.
Lourdes Nisce, M.D.
Helene Pavlov, M.D.
Nathan Poker, M.D.
Thomas A. Sos, M.D.
R. Caird Watson, M.D.
Patricia Winchester, M.D.

Associate Attending Radiologists
Paula W. Brill, M.D.
F. Mitchell Cummins, M.D.
Bernard Ghelman, M.D.
Antonio F. Govoni, M.D.
Claudia I. Henschke, M.D.
James R. Hurley, M.D.
William A. Rubenstein, M.D.
Salil D. Sarkar, M.D.
Robert Schneider, M.D.
George Stassa, M.D.
Hind S. Teixidor, M.D.
Robert D. Zimmerman, M.D.

Assistant Attending Radiologists
Gerald F. Abbott, M.D.
Steven A. Albert, M.D.
Barbara Lucile Binkert, M.D.
Georgia A. Cataldi, M.D.
Sheila D. Davis, M.D.
Shari B. Epstein, M.D.
Richard J. Gray, M.D.
Andrew W. Haraway Jr., M.D.
Linda A. Heier, M.D.
James C. Hirschy, M.D.
Carl E. Johnson, M.D.
Richard J. Katz, M.D.
Young Sook Kim, M.D.
Peter A. Kosovsky, M.D.
George Krol, M.D.
Susan C. Krysiewicz, M.D.
Miriam Levy-Ravetch, M.D.
Charlynn C. Maniatis, M.D.
John A. Markisz, M.D.
Marlene E. Rackson, M.D.
Elizabeth Ramirez de Arellano, M.D.
Scott J. Sherman, M.D.
Carl Tack, M.D.
Karen Weingarten, M.D.
David A. Wojtasek, M.D.
David F. Yankelevitz, M.D.
Kenneth Zirinsky, M.D.

Clinical Affiliate
Martin Barandes, M.D.

Professional-Associate Staff

Attending Physicist (Nuclear Medicine)
Rodney E. Bigler, Ph.D.

Assistant Attending Physicist (Nuclear Medicine)
Pat Zanzonico, Ph.D.

Professional Associate (Physics)
Stephen Balter, Ph.D.

Graduate Staff

Clinical Fellows
Alison Bender Haimes, M.D.
Antonio G. Bermudez, M.D.
David Braunstein, M.D.
Anand S. Jagannath, M.D.
Caren Jahre, M.D.
Anna Kelly, M.D.
Steven V. Lossef, M.D.
Jasbir Mahal, M.D.
Richard B. Rafal, M.D.
Richard A. Sarner, M.D.
Susan Schraft, M.D.
Craig H. Sherman, M.D.
John Sierra, M.D.

Assistant Radiologists (Nuclear Medicine)
Kathleen D. Friend, M.D.
Mordechai Lorberboym, M.D.

Assistant Radiologists
Thomas P. Boyle, M.D.
Ana G. Cajade, M.D.
Gail A. Calamari, M.D.
Samuel Choi, M.D.
Patricia E. Cole, M.D.
Gerard A. Compito, M.D.
Christopher J. Conners, M.D.
Frank A. DuPont, M.D.
Robert J. Ernst, M.D.
Roger J. Frey, M.D.
Shulamith Goldberg, M.D.
James F. Gruden, M.D.
Santiago J. Hernandez, M.D.
Terry L. Levin, M.D.
Laura Liberman, M.D.
Ronald A. Manfredi, M.D.
Ruth E. Moran, M.D.
Kenneth P. Morrison, M.D.
Levon N. Nazarian, M.D.
Bette J. Nyhlen, M.D.
Steven R. Olson, M.D.
Lawrence H. Schwartz, M.D.
Donna M. Scuderi, M.D.
Emily Stern, M.D.
Jody Lee Tanabe, M.D.

Rehabilitation Medicine

Medical Staff

Physiatrist-in-Chief
Willibald Nagler, M.D.

Associate Attending Physiatrists
Ronald F. Green, M.D.
Emmanuel Rudd, M.D.

Assistant Attending Physiatrists
Sheryl R. Levin, M.D.
Subhadra L. Nori, M.B.,B.S.
Gale Pugliese, M.D.
Irene von Estorff, M.D.
(leave of absence)

Clinical Affiliates (Physiatry)
Irina Barkan, M.D.
Isabella Maria Rampello, M.D.
Dae-Sik Rho, M.D.
Peter H. Stern, M.D.

Professional-Associate Staff

Professional Associates
Delia Gorga, Ph.D.
Michael E. Groher, Ph.D.
R. Paul Jordan, D.P.M.
H. Richard Lehneis, Ph.D.
Lydia Wingate, Ph.D.

Professional Associate (Podiatry)
Michael Polchaninoff, D.P.M.

Graduate Staff

Assistant Physiatrists
Michael J. Brennan, M.D.
Hope Shuyler Hacker, M.D.
Timothy Hall, M.D.
Elisabeth A. Lachmann, M.D.
Jack L. Rook, M.D.
Michael Sinel, M.D.
John A. Sklar, M.D.
Richard Tunkel, M.D.

Surgery

Surgeon-in-Chief
G. Tom Shires, M.D.

General Surgery

Medical Staff

Attending Surgeons
Murray F. Brennan, M.D.
Jerome J. Decosse, M.D.
Peter Dineen, M.D.
S. Frank Redo, M.D.
Albert L. Rubin, M.D.
Kurt H. Stenzel, M.D.
Bjorn Thorbjarnarson, M.D.
George E. Wantz, M.D.
John C. Whitsell II, M.D.

Associate Attending Surgeons
Harry L. Bush Jr., M.D.
Jhoong S. Cheigh, M.D.
George N. Cornell, M.D.
Armand F. Cortese, M.D.
John Mihran Davis, M.D.
Cleon W. Goodwin, M.D.
Peter M. Guida, M.D.
Stephen F. Lowry, M.D.
Vincent F. Marzulli, M.D.
Kevin P. Morrissey, M.D.
Walter F. Pizzi, M.D.
Robert R. Riggio, M.D.
Stuart D. Saal, M.D.
Michael F. Silane, M.D.
Paul A. Skudder, M.D.
William T. Stubenbord, M.D.
John F. Sullivan, M.D.
Luis Tapia, M.D.
Roger W. Yurt, M.D.

Assistant Attending Surgeons
Anthony C. Antonacci, M.D.
John M. Aronian III, M.D.
Philip S. Barie, M.D.
James L. Clarke, M.D.
William T. Curry, M.D.
Richard A. Dietrich, M.D.
Kenyon B. Field, M.D.
Jerome Finkelstein, M.D.
Gregory Fried, M.D.
James P. Gaston, M.D.
Andrew I. Glantz, M.D.
Paul H. Halebian, M.D.
John G. Hansen, M.D.
G. Errol King, M.D.
Michael R. Madden, M.D.
Carmine J. Mauro, M.D.
Joseph A. McAuley, M.D.
Eugene J. Nowak, M.D.
G. Tom Shires III, M.D.
Harry Statman, M.D.
John C. L. Wang, M.D.
Giles F. Whalen, M.D.

Clinical Affiliate
David A. Mayer, M.D.

Professional-Associate Staff

Surgeons' Assistants
Diana L. D'Amelio
Donna M. Hamilton
David Johnson
John Lee
Mary L. Lombardi
Geoffrey O'Sullivan
Andrea J. Portenoy
Patricia J. Richardson
Howard F. Rose

Graduate Staff

Clinical Fellows
Annabel E. M. Barber, M.D.
Thomas J. Fahey III, M.D.
Yuman Fong, M.D.
Felix A. Garcia-Perez, M.D.
William G. Jones II, M.D.
Michael A. Marano, M.D.
Joseph P. Minei, M.D.
Mark L. Silen, M.D.

Surgeons
James D. Albert, M.D.
W. Michael Canning, M.D.
Stephen E. Ettinghausen, M.D.
Gary A. Fantini, M.D.
Allen B. Jetmore, M.D.
Marisa Lawrence, M.D.
Louis G. Prevosti, M.D.
Alan I. Reed, M.D.
James R. Taylor Jr., M.D.

Assistant Surgeons
Mark H. Bilsky, M.D.
David M. Brams, M.D.
John M. Brown III, M.D.
G. Hadley Callaway, M.D.
Eli R. Capouya, M.D.
Michael E. Chen, M.D.
Armann O. Ciccarelli, M.D.
Mark A. Codner, M.D.
Michael S. Conte, M.D.
John M. Feder, M.D.
Eva Fischer, M.D.
J. Jeffrey Freda, M.D.
Louis Gevirtzman, M.D.
Heidi D. Gorsuch, M.D.
Stephen T. Greenberg, M.D.
Arthur S. Hawes, M.D.
Randal D. Haworth, M.D.
Nicole J. Kafka, M.D.
Wilson Ko, M.D.
Thomas K. Lee, M.D.
I. Michael Leitman, M.D.
Sharon L. Lojun, M.D.
Andrew M. Lowy, M.D.
Steven K. Macheers, M.D.
Jonathan D. Mandell, M.D.
Edward J. Marcaccio Jr., M.D.
Stephen M. Martin, M.D.
Eric J. Miller, M.D.
Gregory M. Organ, M.D.
Aaron P. Perlmutter, M.D.
Catherine A. Ronaghan, M.D.
Paul T. Rubery Jr., M.D.
Alexandra H. Simkovich, M.D.
Lisa A. Straus, M.D.
Kenneth K. Tanabe, M.D.
J. Rogers Temple Jr., M.D.
William A. Thompson III, M.D.
Kimberly J. Van Zee, M.D.
Anthony P. Vastola, M.D.
Joseph R. Vitolo, M.D.
Michael R. Zenn, M.D.

Cardiothoracic Surgery

Medical Staff

Attending Surgeon-in-Charge
O. Wayne Isom, M.D.

Attending Surgeons
Cranston W. Holman, M.D.
David B. Skinner, M.D.

Associate Attending Surgeons
John C. McCabe, M.D.
Arthur J. Okinaka, M.D.
Valavanur A. Subramanian, M.D

Assistant Attending Surgeons
Nasser K. Altorki, M.D.
Michael E. Burt, M.D.
Jeffrey P. Gold, M.D.
Karl H. Krieger, M.D.
Samuel J. Lang, M.D.
Robert B. Peyton, M.D.

Graduate Staff

Clinical Fellow
William D. Lazenby Jr., M.D.

Thoracic Surgeons
Lawrence H. Durban, M.D.
Barry J. Zadeh, M.D.

Assistant Thoracic Surgeons
Gabriel S. Aldea, M.D.
Daniel G. Ciaburri, M.D.

Dental and Oral Surgery

Medical Staff

Attending Oral Surgeon-in-Charge
Stanley J. Behrman, D.M.D.

Attending Dentist
John J. Putnam, D.D.S.

Associate Attending Oral Surgeon
David A. Behrman, D.M.D.

Associate Attending Dentist (Endodontist)
Nelson I. Mendell, D.M.D.

Associate Attending Dentist (Myo-Functional Therapy)
Harvey Miller, D.D.S.

Associate Attending Dentist (Orthodontist)
Joseph D. Davis, D.D.S.

Associate Attending Dentists (Periodontists)
Seymour M. Koteen, D.D.S.
Joseph E. Rowan, D.D.S.

Associate Attending Dentists (Prosthodontists)
Gerald M. Galvin, D.D.S.
Jason C. Lee, D.D.S.
Ivin B. Prince, D.D.S.

Associate Attending Dentist (TMJ)
Leonard E. Quitt, D.D.S.

Associate Attending Dentists
Lawrence A. Behrman, D.D.S.
Louis Marino, D.D.S.
Ernest R. Piccaro, D.D.S.

Assistant Attending Oral Surgeons
Steven M. Baum, D.D.S.
Daniel Buchbinder, D.M.D.
Thomas M. Darrigan, D.D.S.
Arthur C. Elias, D.M.D.
Michael R. Glogoff, D.M.D.
Jerry L. Halpern, D.D.S.
Andrew J. Hauser, D.D.S.
Claudia B. Kaplan, D.D.S.
Fredrick M. Lifshey, D.D.S.
Peter H. Pruden, D.D.S.
Steven J. Tunick, D.M.D.

Assistant Attending Dentist (Endodontist)
Sebastian J. Lentini, D.D.S.

Assistant Attending Dentists (Orthodontists)
Marc S. Lemchen, M.D.
Gregory W. Sanford, D.M.D.
Michael G. Steinberg, D.D.S.

Assistant Attending Dentists (Pedodontists)
Louis M. Cooper, D.D.S.
Mark S. Hochberg, D.D.S.
David J. Levine, D.D.S.
Jack L. Mitchell, D.D.S.

Assistant Attending Dentists (Periodontists)
Barry M. Libin, D.D.S.
Philip D. Pack, D.M.D.
George W. Sferra Jr., D.D.S.

Assistant Attending Dentists
Richard F. Giannandrea, D.D.S.
Robert Karsten, D.D.S.
Guy N. Minoli, D.D.S.
Jonathan Prince, D.D.S.
Steven Saltzman, D.D.S.
Robert M. Sorin, D.M.D.

Graduate Staff

Oral Surgeon
George P. Tavolilla, D.D.S.

Assistant Oral Surgeon
Jonathan T. Perry, D.D.S.

Intern
Gregory C. Chotkowski, D.M.D.

Interns-General Practice Residency Program
Todd H. Lerner, D.D.S.
Maria E. Parrella, D.D.S.
George D. Sargiss, D.D.S.

Neurosurgery

Medical Staff

Attending Surgeon-in-Charge
Russel H. Patterson Jr., M.D.

Attending Surgeon
Richard A. R. Fraser, M.D.

Associate Attending Surgeons
Joseph H. Galicich Jr., M.D.
Francis W. Gamache Jr., M.D.
Michael H. Lavyne, M.D.

Assistant Attending Surgeons
Jamshid B. G. Ghajar, M.D.
Robert B. Snow, M.D.

Graduate Staff

Surgeon
David W. Andrews, M.D.

Assistant Surgeons
John M. Emery III, M.D.
Mazen Khayata, M.D.
Stanley B. Martin, M.D.
Kevin J. Tracey, M.D.

Orthopedics

Medical Staff

Surgeon-in-Chief, The Hospital For Special Surgery
Philip D. Wilson Jr., M.D.

Attending Surgeons
Allan E. Inglis, M.D.
John N. Insall, M.D.
Bernard Jacobs, M.D.
Joseph M. Lane, M.D.
David B. Levine, M.D.
Chitranjan S. Ranawat, M.D.
Leon Root, M.D.
Eduardo A. Salvati, M.D.
Russell F. Warren, M.D.

Associate Attending Surgeons
Walter H. O. Bohne, M.D.
Stephen William Burke, M.D.
John P. Lyden, M.D.
Peter J. Marchisello, M.D.
Ralph C. Marcove, M.D.
Paul M. Pellicci, M.D.
Thomas P. Sculco, M.D.

Assistant Attending Surgeons
David W. Altchek, M.D.
Abraham T. Appleton, M.D.
Roberta Brockman, M.D.
Frank P. Cammisa Jr., M.D.
Charles N. Cornell, M.D.
Mark P. Figgie, M.D.
John H. Healey, M.D.
Norman A. Johanson, M.D.
Richard McCormack Jr., M.D.
Stephen J. O'Brien, M.D.
Jeanne R. Pamilla, M.D.
Kostas P. Velis, M.D.
Thomas L. Wickiewicz, M.D.
Russell E. Windsor, M.D.

Graduate Staff

Surgeons
Michael M. Alexiades, M.D.
Walter B. Beaver, M.D.
Michael W. Becker-Fluegel, M.D.
William W. Brien, M.D.
Daniel D. Buss, M.D.
Paloma B. Cervera, M.D.
David H. Clements, M.D.
Brian J. Galinat, M.D.
Joel M. Goldstein, M.D.
Serena Shaw Hu, M.D.
Robert J. Maurer Jr., M.D.
Drew V. Miller, M.D.
David G. Mohler, M.D.
Douglas E. Padgett, M.D.
Steven G. Robbins, M.D.
Samuel J. Snyder, M.D.
T. Scott Stanwyck, M.D.
Steven H. Stern, M.D.
Scott W. Wolfe, M.D.
Steven B. Zelicof, M.D.

Assistant Surgeons
Michael S. Bednar, M.D.
Mark K. Bowen, M.D.
Robert L. Buly, M.D.
John C. Edwards, M.D.
Stephen P. England, M.D.
William F. Flynn Jr., M.D.
Michelle Gerwin, M.D.
Steven B. Haas, M.D.
Scott G. Kantor, M.D.
Kenneth J. Kress, M.D.
Scott D. Martin, M.D.
Michael J. Maynard, M.D.
Bruce H. Moeckel, M.D.
William H. Montgomery, M.D.
Michael C. Moran, M.D.
Christopher S. Mow, M.D.
Stephen J. Nicholas, M.D.
Michael J. Pagnani, M.D.
Brendan M. Patterson, M.D.
Jeffery L. Pierson, M.D.
Louis H. Rappoport, M.D.
Peter F. Rizzo, M.D.
Mark Sobel, M.D.
Clifford B. Tribus, M.D.

Plastic Surgery

Medical Staff

Attending Surgeon-in-Charge
Lloyd Hoffman, M.D.

Attending Surgeons
Dicran Goulian, M.D.
Randolph H. Guthrie Jr., M.D.

Associate Attending Surgeon
James W. Smith, M.D.

Assistant Attending Surgeons
Robert L. Cucin Jr., M.D.
Joseph Feinberg, M.D.
David A. Hidalgo, M.D.
Gerald Imber, M.D.
Gregory S. La Trenta, M.D.
Thomas C. McLure III, M.D.
Kenneth O. Rothaus, M.D.
Robert G. Schwager, M.D.
B. Donald Sklansky, M.D.

Clinical Affiliate
Edward W. Powers III, M.D.

Graduate Staff

Surgeons
James M. Sheridan, M.D.
John G. Sparrow, M.D.

Assistant Surgeons
Lloyd B. Gayle, M.D.
Robert T. Grant, M.D.
Richard M. Hodnett, M.D.
Lyle S. Leipziger, M.D.

Urology

Medical Staff

Attending Surgeon-in-Charge
E. Darracott Vaughan Jr., M.D.

Attending Surgeons
William R. Fair, M.D.
John H. McGovern, M.D.
Edward C. Muecke, M.D.
Willet F. Whitmore Jr., M.D.
John J. Williams, M.D.

Associate Attending Surgeons
John W. Coleman, M.D.
Marc Goldstein, M.D.
Harry W. Herr, M.D.
David T. Mininberg, M.D.
W. Reid Pitts Jr., M.D.
Jon M. Reckler, M.D.
Robert A. Riehle Jr., M.D.

Assistant Attending Surgeons
Carlos Arango, M.D.
Felix L. Badillo, M.D.
Neil H. Bander, M.D.
Stephen R. Baumgarten, M.D.
Robert J. Berson, M.D.
John D. Birkhoff, M.D.
John C. Byrne, M.D.
Peter N. De Sanctis, M.D.
Jean-Francois Eid, M.D.
Francis E. Florio, M.D.
Stephen Fortunoff, M.D.
John A. Fracchia, M.D.
Jeffrey Glasser, M.D.
Robert W. Gluck, M.D.
Urbano K. Guarin, M.D.
Jack I. Hershman, M.D.
John J. Ippolito, M.D.
Stuart Kase, M.D.
Nachum M. Katlowitz, M.D.
Kenneth R. Kurz, M.D.
Marcus H. H. Loo, M.D.
Franklin C. Lowe, M.D.
Isaac Madeb, M.D.
James P. McCarron Jr., M.D.
Thomas P. McGovern, M.D.
Piero O. Niceta, M.D.
Carl M. Pellman, M.D.
Ben I. Preminger, M.D.
Jay S. Rosen, M.D.
Barry W. Rubin, M.D.
Jeffrey J. Sandhaus, M.D.
R. Ernest Sosa, M.D.
Vincent J. Tumminello, M.D.
Sasha Wainstein, M.D.
Michael H. Wechsler, M.D.
Gilbert J. Wise, M.D.
Morey Wosnitzer, M.D.
Paul L. Ziegler, M.D.

Clinical Affiliate
Robert S. Waldbaum, M.D.

Graduate Staff

Clinical Fellow
Frederick A. Gulmi, M.D.

Surgeons
Bruce R. Gilbert, M.D.
Jeffrey I. Gorelick, M.D.

Assistant Surgeons
Edward M. Beck, M.D.
Kenneth J. Bregg, M.D.
David G. Hesse, M.D.
Albert N. Kim, M.D.
Neal D. Shore, M.D.
Joph Steckel, M.D.
Robert E. Steckler, M.D.
Eric B. Whitacre, M.D.

Directors of Laboratories

Clinical Pathology Laboratories

Pathologist-in-Chief
John T. Ellis, M.D.
Laboratory Manager
Marvin Tessler, Ph.D.
Consultant in Clinical Biochemistry
Alton Meister, M.D.

Blood Bank and Transfusion Service
Director
Carl F. W. Wolf, M.D.
Assistant Director
Annie M. Strupp, M.D.

Clinical Biochemistry
Director
Edward Schubert, Ph.D.
Assistant Director
Gordon F. Fairclough Jr., Ph.D.

Clinical Hematology
Director
Carl G. Becker, M.D.
Associate Director
Adolfo Firpo-Betancourt, M.D.

Clinical Microbiology
Director
Laurence B. Senterfit, Sc.D.

Cytogenetics
Director
M. Lita Alonso, M.D.

Cytology
Director
Charles A. Santos-Buch, M.D.
Assistant Director
June H. Koizumi, M.D.

Surgical Pathology
Director
C. Richard Minick, M.D.
Associate Director
Janet A. Mouradian, M.D.

Clinical Laboratory Computer Services
Director
Jerald D. Gass, Ph.D.

Clinical Diagnostic Laboratories, Directors

Basal Metabolism
David V. Becker, M.D.

Cardiac Catheterization, Adult
C. Lynn Skelton, M.D.

Cardiac Catheterization, Pediatrics
Aaron R. Levin, M.D.

Cardiac Graphics, Adult
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Cardiac Graphics, Pediatrics
Kathryn H. Ehlers, M.D.

Electroencephalography
Gail E. Solomon, M.D.

Neurophysiology
Jonathan Victor, M.D., Ph.D.

Nuclear Medicine
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Joshua Muscat, M.P.H.

Teaching Associate
Irwin Katz, M.P.H.

Deaths

We note with great regret the passing during 1988 of the following members of the center's professional staff and faculty:

Katherine A. Belton, M.D.
Clinical Affiliate in Psychiatry
John G. Keuhnelian, M.D.
Attending Surgeon (Urology)
Russell W. Lavengood, M.D.
Attending Surgeon (Urology)
Raymond E. Lockard, Ph.D.
Assistant Professor of Biochemistry
Melville A. Platt, M.D.
Associate Attending Obstetrician and Gynecologist
Neal L. Rosen, M.D.
Assistant Attending Neurologist and Pediatrician
Robert W. Selfe, M.D.
Otorhinolaryngologist-in-Chief
David S. Speer, M.D.
Assistant Attending Surgeon

Making a Gift to the New York Hospital-Cornell Medical Center

Gifts, bequests and trusts are important sources of support for the New York Hospital-Cornell Medical Center. Such gifts provide funding for a wide range of programs, including those that provide patient care, educate future physicians and scientists, and expand community outreach. Additionally, these gifts make possible pioneering biomedical research which results in new and improved cures and treatments for disease, helping people today as well as in future generations.

Gifts may be made in a number of ways—by cash, securities, or tangible property. They may be given outright, by bequest, or through a trust arrangement which can provide an income to the medical center, to the donor, or to his or her beneficiaries, for a predetermined period of time or for life.

The medical center encourages gifts without restriction so as to permit greater flexibility in planning and administering its extensive programs in patient care, education and research. However, if a donor is interested in making a gift, bequest, or trust to be used in whole or in part for any specific purpose within the hospital, medical college, or medical center, such use may be specified.

The New York Hospital-Cornell Medical Center is comprised of the Society of the New York Hospital and Cornell University Medical College. Both the Society and Cornell University, of which the medical college is a part, are qualified not-for-profit institutions which receive major support from private gifts. Gifts to the hospital, medical college, and medical center by individuals, foundations, or corporations are exempt from income, gift, and inheritance taxes to the extent and in the manner provided by federal and state laws.

The medical center is pleased to provide information about its numerous programs and activities, and to consult with donors and their advisors about various gift ideas, many of which provide a naming opportunity. Our *Guide to Giving* is available by calling the number listed below.

The Society of the New York Hospital, which is the legal corporate name for the New York Hospital, is a corporation created by Royal Charter granted by King George III of England in 1771. The suggested terminology for an unrestricted bequest to or for its benefit is: "I give, devise and bequeath to The Society of the New York Hospital Fund, Inc., a corporation created under the New York State Not-for-Profit Corporation Law and located in New York City, New York the sum of $ _____ (or description of the property) to be used for the general corporate purposes of The Society of the New York Hospital as its board of directors should determine."

If a bequest is made to the medical college, the language may be: "I give and bequeath to Cornell University the sum of $ _____ or (description of property) for use in connection with its Medical College in New York City."

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Further information about making a gift to the hospital, college, or medical center can be obtained from Nancy M. Walker, Director of Development, The New York Hospital-Cornell Medical Center, 525 East 68th Street, New York, NY 10021, 212/746-1700.

The New York Hospital-Cornell Medical Center
525 East 68th Street, New York, N.Y. 10021

The New York Hospital-Cornell Medical Center

1989 ANNUAL REPORT

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Cover: View of the New York Hospital-Cornell Medical Center, looking north along York Avenue. The Lasdon Biomedical Research Center is on the right and the Helmsley Medical Tower on the left.

Chairmen's Reports

TWO YEARS AGO, faced with its most serious financial crisis since the Great Depression, the New York Hospital launched an exhaustive undertaking in operations analysis and action. Last year, the results of that effort were seen in a decided improvement in financial stability and a reduction of the hospital's operating deficit from $57 million to less than $20 million. While much remains to be done, there is a palpable sense, both within the institution and without, that the hospital's problems have been addressed with intelligence, vigor, and imagination and that there are good grounds for optimism.

This turnaround is a tribute to the leadership of Dr. David Skinner and his senior administrative staff. Their response not only has produced a much brighter financial picture for the hospital but has provided a model in hospital management. In fact, state officials have asked them to make the management-information systems developed here available to other hospitals.

Equally important as a factor in last year's results was the high degree of communication among administration, physicians, and staff. As third-party payers have instituted major changes in health-care reimbursement, the hospital has had to adjust at every level. Cooperation and communication have assumed a high priority and will be a key to continued progress.

Good progress has also been made in plans to modernize the hospital. New York State has pledged support for major new construction, which may begin as early as 1991. Meanwhile, the continuing generosity of many friends enables us continually to update equipment and facilities. To these many friends and to the 8,000 people whose skill and dedication make this center the special place it is, I extend the board of governors' sincere thanks.

M.R. Greenberg

Maurice R. Greenberg
Chairman, Society of the New York Hospital
Joint Board Chairman, 1989

IN 1989, under the continuing superb leadership of Dr. G. Tom Shires, Cornell University Medical College made great strides toward one of the principal goals enunciated earlier in the decade—the renovation and reconstruction of its research laboratories. Last March saw the dedication of the William and Mildred Lasdon Biomedical Research Center, an 11-story structure devoted to basic biomedical research. A year later, all floors of this beautiful new building are either occupied or in the midst of being occupied.

A high point in this process was the announcement last fall of a gift of $6 million to the medical college for the establishment of the Margaret M. Dyson Vision Research Institute, a facility that will help lay the basis for progress against serious sight disorders. The gift reflects the long-standing commitment of the Dyson family to the medical college and medical center, as well as to ophthalmic research. For his overall leadership of the development campaign for ophthalmology, the college is profoundly grateful to Jansen Noyes Jr., a life overseer of CUMC.

The Dyson gift capped a year of extraordinary generosity on the part of the many friends of this medical center. On behalf of the university board of trustees and the medical college's board of overseers, let me express heartfelt gratitude for this support.

Many thanks, too, to the medical college faculty for its unwavering dedication to the highest level of medical education. At a time of declining applications to medical schools, the continuing quality of Cornell applicants and students represents a glowing tribute to this dedication.

Frank Rhodes

Frank H. T. Rhodes
President, Cornell University
Joint Board Chairman, 1990

President's Report

AT A DIFFICULT time for American hospitals, the New York Hospital has much reason to be heartened by the achievements of the past year. Our principal goals as 1989 began were three—to greatly reduce an operating deficit that reached $57 million in 1988, to do so without any compromise in the quality of patient care, and to maintain the hospital's position as a bulwark of medical progress. All three objectives were attained.

As the year began, it was clear that reducing the deficit was a matter of the utmost urgency. Chronic monthly losses of the size the hospital sustained during 1988 can strike at the heart of the institution. Thus, it is a considerable cause for satisfaction that a 65 percent deficit reduction was achieved last year.

"The New York Hospital has much reason to be heartened by the achievements of the past year."

Providing the driving force for further progress is an action plan—developed through extensive analysis, testing, and validation—that aims to bring the hospital's operating budget close to balance in the coming year. As I noted in last year's report, fiscal projections must be made cautiously, given the volatility of the health-care sector. Still, the entire senior management and clinical leadership are committed to reaching this goal, which is key to the institution's ability to proceed with new programs and to accelerate the major modernization that is essential to its future.

The encouraging results of the past year reflect a concerted effort to adjust to a new way of reimbursing hospitals for inpatient care. Instituted in New York State in 1988, this new system mandates a flat rate based on a patient's diagnosis, whereas payment was formerly determined by length of stay in the hospital and cost of care. The new policy presents a particular challenge to institutions, like this hospital, that care for the most difficult, complex cases.

Progress has come from action on two fronts—from making an all-out effort to achieve economies in our operations consistent with quality care, while, at the same time, pressing for crucial changes in state reimbursement rates that we believe to be misguided.

In a number of instances, it seemed to us that payment formulas established by the state were simply ill-conceived. A particularly striking example was the schedule for low-birthweight infants, like those treated in our hospital's perinatology center. With the largest neonatal intensive care unit in the tri-state area, this center has made formal agreements with hospitals throughout the region to accept transfers of high-risk infants to its facilities; yet, the reimbursement for low-birthweight infants established under the new system was so low that the hospital was losing $3.9 million per year from this single unit.

Most ironic of all, this loss derived largely from the unit's success in saving infants' lives: newborns who might have perished in other hospitals survived the crisis of their birth through the care received in our center and lived to go home with their parents. While this made a lot of parents happy, it also meant that the center had an average length of stay considerably higher than the statewide average used in setting the reimbursement rate for premature births.

Clearly, it is not the purpose of the new reimbursement policy to penalize hospitals for saving lives, and discussions with state officials have resulted in adjustments of this particular formula and others. This is not to say that our views have prevailed in every instance or that there are not serious issues still outstanding. But the discussions have been conducted in a forthcoming spirit with mutual recognition of the commonality of our goals.

Not only have we gained crucial changes in reimbursement formulas, but state officials have urged us to proceed as directly and rapidly as possible with the planning and implementation of the hospital's major modernization program. In view of the many delays that have occurred over the years, we are greatly encouraged by the state's recognition of the need to move ahead. With our neighbor the Hospital for Special Surgery, we are now in the process of exploring shared use of new facilities as well as joint construction of a building platform over the FDR Drive.

Whatever our differences with the state on particular items of policy, we recognize the importance of the policy's overall goal—to constrain a worrisome rise in society's health-care costs. Thus,

the New York Hospital has embarked on a major effort that has to date resulted in economies and efficiency gains of over $30 million.

Essential to this effort—and certainly the most challenging feature of it—has been the sizable reduction in average lengths of stay of patients at the New York Hospital. What makes this a particular challenge is that it runs counter to the natural intuition of many health professionals that more is better: the more services and tests we provide, the better the outcome for the patient. A basic tenet of the new state system, on the other hand, is that more is not necessarily better and that it is to the patient's advantage, in fact, to return home as soon as possible.

Through a concerted effort of this hospital's professional staff and administration, the average length of stay of patients has been reduced by about one and a half days over the past two years. In addition, inpatient laboratory, radiology, and ancillary studies are down by 15 percent. Most gratifying of all is a total absence of evidence of diminished quality of care. There has been no increase in readmissions, which would be likely to rise if patients were being discharged too quickly; moreover, results of a patient-satisfaction survey reveal increased patient satisfaction in 1989 compared to 1987 (before the new system was in effect), despite budget cuts, fewer employees, and reduced average length of stay.

These gains owe themselves to efforts at all levels of the hospital staff and are a particular tribute to the hospital's quality-assurance program. Greatly strengthened by the establishment of a board-level committee in October 1987, this program is headed by Charlotte Ford, a hospital governor, and Dr. E. William Davis, a hospital vice president. For her work on behalf of this program, Ms. Ford was voted trustee of the year by the Hospital Trustees of New York State.

The quality-assurance committee has shown that it has the will to impose discipline on occasions when it is necessary. But its biggest contribution has been as a troubleshooting agency—in identifying problematic systems and procedures and initiating steps to remedy them. It has played an indispensable role at a time of great change in this institution.

Beyond reducing the hospital's deficit and doing so with no fall-off in quality, a third major goal in 1989 was to maintain the hospital's position at the forefront of clinical care. One major step forward was the establishment of a new program of electrophysiological cardiology, in which new methods are employed to treat life-threatening abnormalities in the heart muscle and its electrical system. Meanwhile, thanks to the generosity of Dorothy and Lewis B. Cullman, patients who undergo cardiac catheterization at the hospital—about 1,800 a year—will soon benefit from a new generation of technology in this field.

Last year, too, saw continued development of the medical center's program in reproductive medicine and fertility, which, when fully established, promises to be the most comprehensive such program in New York City. The hospital can also point to new or expanded programs in cardiology telemetry, epilepsy treatment, pediatric genetics, urologic oncology, and pain management. Further, we are gratified by the great strides made by our partner, Cornell University Medical College, in the development of its programs in basic research. The mutual enhancement of patient care, research, and education remains the cornerstone of this medical center.

FOR SOME TIME, many of us in the health field have had a sense of uneasiness—and even foreboding—about the effect increased pressure for cost constraints would have on the quality of patient care. We are convinced that, by and large, Americans are the beneficiaries of the best health care in the world; yet, its cost has grown at a rate that many leaders find alarming—from less than six percent of the gross national product in 1965 to more than 11 percent today. Moreover, about 15 percent of Americans are uninsured,

and another 20 percent are covered by Medicaid, which in many states does not begin to meet the true cost of care; in other words, about one third of the population has inadequate or uncertain access to the health system at a time when it is consuming an unprecedented share of the national wealth. It does not require great imagination to see that, as difficult as the pressures for cost constraint have been until now, the likelihood is that they will only grow greater.

Nowhere is the issue more palpable than in New York State, which has mounted what may very well be the most intensive effort of any state to contain health-care costs. In recent years, New York's hospitals have collectively ranked last or near last in net operating income, meaning that the balance between surplus and loss from operations was less favorable here than in virtually any other state. A recent comparison between the balance sheet of the New York Hospital and that of a leading academic medical center in another state reveals that we would have suffered no operating deficit had we been reimbursed at the rates in effect in the other state in 1989.

Is the situation in New York, then, an aberration? I expect not. The effort to drastically reduce costs that we are seeing here will more likely than not be the rule in the rest of the country in years ahead. Although the state has made some mistakes, we need to acknowledge that they were made as part of an effort to deal with a serious problem national in scope and that New York State deserves credit for its leadership. Our experience of the past year gives some cause for hope. What it suggests is that we can find a more economic way of providing health care with no loss in quality.

EARLY IN 1990 an event occurred that put the New York Hospital in the news throughout the nation. David Opont, an 11-year-old boy from an improverished Brooklyn neighborhood, was deliberately splashed with gasoline and set on fire, allegedly by a neighborhood bully. With third-degree burns covering 55 percent of his body, he was brought to the New York Hospital's burn center, the largest such unit in the country and one that has consistently been in the forefront of advances in burn care since it was established here in 1975 by the hospital's surgeon-in-chief, Dr. G. Tom Shires. The advances have been dramatic: whereas 20 years ago the chances for survival in such cases would have been extremely slim, the odds have steadily increased over time, and, as this report goes to press, the young man has made a recovery from his wounds and has been discharged from the hospital.

Amidst an outpouring of public sympathy, visitors to the patient included Former President and Mrs. Reagan, Bill Cosby, Mayor David Dinkins, Schools Chancellor Joseph Fernandez, Lieutenant Governor Stan Lundine, and Reverend Jesse Jackson. But, the blaze of national publicity notwithstanding, the care that saved David's life was indistinguishable from the care that goes on in this hospital every day. This is medicine at its best, this is the hospital's reason for being. It is our commitment to such care that governs all our efforts.

David B. Skinner

David B. Skinner, M.D.
President, The New York Hospital

Dean's Report

FOR CORNELL University Medical College, the 1980s was first and foremost a decade of scientific renewal. As the decade began, the college could look back on 82 years of major contributions to biomedical research and to a distinguished record in educating leaders in academic medicine. But, with federal support of biomedical science leveling off and research costs accelerating, it was clear that the college needed to develop new and expanded sources of funding if it was to remain in the front rank of research institutions.

Thus, with leadership from my predecessor as dean, Dr. Thomas H. Meikle Jr., a campaign of scientific renewal was launched to achieve three principal aims:

—To attract talented researchers to the medical center—both seasoned scientists and promising young investigators.

—To build new facilities required for modern research—and particularly to replace laboratories judged by the faculty to be antiquated or obsolete.

—To address the growing need, both at the medical center and nationally, for physician-scientists, at a time when the number of physicians choosing research careers was dwindling.

With the conclusion of the decade, it is with a great sense of pride that we assess the progress that has been made in achieving these goals. It is also a time to take note of the work that remains as we look ahead to the 1990s.

"In the 1988-89 academic year, funding for research at this medical center, including research training, was about $65 million, reflecting an increase of more than 100 percent over seven years."

THE PROGRESS has been considerable. Between 1978 and 1983, the funds awarded to NYH-CMC scientists by the National Institutes of Health, the world's largest source of support for biomedical research, rose from $12.5 million to $24 million. Since that time, it has nearly doubled again, rising last year to more than $45 million. All told, in the 1988-89 academic year, funding for research at this medical center, including research training, was about $65 million, reflecting an increase of more than 100 percent over seven years.

In a fitting end to a decade of scientific renewal, the year began with the dedication of the William and Mildred Lasdon Biomedical Research Center and ended with a major gift to round out the occupancy of this new building.

Expanding the college's research space by nearly one third, the Lasdon Center is the setting for a tremendous variety of studies in what is called basic biomedical science. It is well known that much of the progress in patient care owes itself to research undertaken as part of a general quest for new biological knowledge rather than as a means of solving a particular clinical problem. It is to this vital enterprise—the discovery of basic knowledge that opens the way for medical progress—that the Lasdon Center is dedicated.

At the year's end came the announcement of a generous gift to round out the occupancy of this handsome new structure—a $6-million grant from the Dyson Foundation for an institute devoted to studies on the basic mechanisms of eye disorders. Occupying one floor of the Lasdon Center, the Margaret M. Dyson Vision Research Institute will provide an unparalleled opportunity to advance the scientific effort against major sight-threatening diseases.

Under the leadership of Dr. D. Jackson Coleman, Cornell's department of ophthalmology has pioneered in diagnostic and therapeutic uses of ultrasound, in the treatment of the lethal childhood disease retinoblastoma and other retinal disorders, and in new approaches to the treatment of glaucoma. Now the Dyson Institute opens the way for an expanded research effort, particularly with respect to tumors and degenerative diseases of the retina—such as macular degeneration, an affliction that all too often leads to blindness in the elderly.

A unique feature of research at Cornell University Medical College is that it offers unsurpassed opportunities for scientific collaboration with neighboring institutions on York Avenue—Rockefeller

University, Memorial Sloan-Kettering Cancer Center, and the Hospital for Special Surgery. In effect, these opportunities multiply the impact of dollars spent on Cornell science, and the Dyson Vision Research Institute will do this to the fullest extent.

Thus, to take advantage of eye-related research resources at Rockefeller University and Memorial Sloan-Kettering, the institute will have a scientific advisory committee composed of scientists and research clinicians from each of the three institutions. The committee will identify scientists and programs that can be used for research into specific eye diseases—for example, the neurobiological studies of Nobel laureate Dr. Torsten Wiesel and the cell-biology research of Dr. Gunter Blöbel, both of Rockefeller University.

The Dyson Vision Research Institute will be under the direction of Dr. Coleman, the John Milton McLean Professor and chairman of the department of ophthalmology at the medical college and ophthalmologist-in-chief of the New York Hospital. Slated to join the Cornell faculty as director of interinstitutional research is Dr. Peter MacLeish, currently an associate professor at Rockefeller University. Dr. MacLeish is a recent recipient of a Jules and Doris Stein Professorship in Ophthalmology, a five-year award for basic-science studies in this field.

THE PAST YEAR has also seen notable progress in another major aspect of scientific endeavor at Cornell, the education of physician-scientists. These are the people who lead the way in translating new knowledge from basic research to patient care—and never has their education assumed more importance than in the 1980s. The decade began, after all, with warnings from a national leader in medical education that the physician-investigator was becoming "an endangered species."

As an institution that prides itself on the large number of its graduates who choose careers in research, CUMC has clearly had a responsibility to address this problem. Our primary vehicle for this is a dual-degree program in which candidates earn both the M.D. degree and a Ph.D. in medical sciences. Candidates spend their first two years at the medical college, then enter a doctoral program either at Rockefeller University or Cornell's graduate school of medical sciences (GSMS), and, finally, after receiving their doctorates, complete their medical education with one year's clinical experience at the medical college. Throughout this entire educational sequence, all candidates receive full tuition plus a stipend for living expenses.

In the past decade the medical college—in conjunction with its York Avenue neighbors—has nearly tripled the number of M.D.-Ph.D. candidates that it accepts in each entering class, from five in 1980 to 14 in 1990. This program was expanded and strengthened through two major developments during the past year: a generous gift from the Andrew W. Mellon Foundation provides funding for three new students a year, and a five-year grant from the National Institutes of Health supports two new students yearly.

The Mellon Foundation grant breaks new ground in offering candidates an open choice in where they pursue their scientific studies, whether at Rockefeller University, Sloan-Kettering or the medical college. The NIH grant renews support for the long-standing CUMC-Rockefeller program and provides additional funding for two new candidates annually in the CUMC-GSMS program.

Both awards reflect the growing strength of the graduate school. Founded in 1952 as a semi-autonomous component of the Cornell University graduate program, the GSMS draws its faculty from Cornell University Medical College and from the Sloan-Kettering Institute, the basic-science division of Memorial Sloan-Kettering Cancer Center. In no decade was more achieved than in the one just past, which saw major new funding for student scholarships, recruitment of chairmen and talented young investigators in microbiology and cell biology, and improved integration of

the CUMC and Sloan-Kettering divisions. A $50 million anonymous gift to the medical college in 1983 gave tremendous impetus to this progress, which has resulted in a more than 30 percent annual increase in applicants to the graduate school. About 450 applications are now received there yearly, from which about 25 Ph.D. candidates are accepted.

Overseeing these salutary developments has been Dr. Bernard Horecker, dean of the graduate school of medical sciences, who has raised its program to a new level. His forthcoming retirement presents us with one of a number of challenges we will face in the 1990s.

"In the past decade the medical college —in conjunction with its York Avenue neighbors— has nearly tripled the number of M.D.-Ph.D. candidates that it accepts in each entering class."

THE SUCCESSES of these past years notwithstanding, the challenges ahead for science at Cornell remain considerable. To Dr. Horecker's retirement add the recent resignation of the medical college's able chairman of medicine, Dr. R. Gordon Douglas Jr. Add, too, the forthcoming retirement of several basic-science chairmen, and it is clear that resources will be needed early on to sustain a high level of scientific leadership at CUMC.

Moreover, while great progress has been made in renovating and building laboratories, new construction remains crucial to our research future. As the Lasdon Center was the centerpiece of the scientific renewal of the 1980s, a new research building will be the key to the continuation of this resurgence in the 1990s. In addition, the medical college will seek funds for a new education center geared to the computer age and for much-needed space for student and faculty housing.

A source of confidence as we look ahead to these challenges is the continuing ability of our partner in this medical center, the New York Hospital, to cooperatively mount important initiatives in clinical medicine. Last year, for example, saw the establishment of a new program in electrophysiological cardiology and surgery under the direction of Dr. Bruce Lerman, who came here from the University of Virginia. Dr. Lerman is one of the principal developers of an improved surgical technique to analyze and treat abnormalities in the heart muscle and its electrical system that lead to life-threatening rhythm disturbances. In the procedure developed by Dr. Lerman and his associates, an arrhythmia is deliberately induced in the operating room so that its source can be traced to a precise area of heart tissue, which can then be surgically removed. This technique may be repeated until all areas in which arrhythmias originate are excised. In other cases, a permanent heart defibrillator can be implanted.

Meanwhile, the medical center's program in reproductive medicine and fertility continues to grow. An in-vitro-fertilization service inaugurated several years ago has evolved into a center for reproductive medicine and fertility with growing opportunities for research. In addition, a generous gift from Dorothy and Lewis B. Cullman to the New York Hospital will soon fund three newly equipped cardiac catheterization labs, thereby enhancing patient care and cardiology studies.

In short, the progress of the past year caps a decade of sustained advance in biomedical research at this medical center. The events of 1989 suggest a gathering momentum and point to new levels of achievement ahead.

G. Tom Shires, M.D.
The Stephen and Suzanne Weiss Dean
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Financial Summary

The Society of the New York Hospital

January 1—
December 31, 1989

Revenues	$ Millions	%
Net Patient Service Revenues	398.4	92.0
Other Operating Revenues	34.7	8.0
Total	$433.1	100.0%
Expenses		
Salaries, Wages and Benefits	258.2	57.0
Medical and Surgical Supplies, Pharmaceuticals & Other Expenses	128.6	28.4
Medical Malpractice and Other Insurance	25.1	5.5
Depreciation, Interest, Leases and Amortization	41.1	9.1
Total	$453	100.0%
Operating Loss	$19.9	
Nonoperating Revenues	$10.5	
Expenses in Excess of Revenues	$9.4	

Cornell University Medical College

July 1, 1988—
June 30, 1989

Revenues	$ Millions	%
Tuition and Fees	8.1	3.9
Investment Income	11.6	5.5
Restricted Funds for Research and Training	56.1	26.9
State Appropriation	1.2	0.5
Indirect Cost Reimbursement	10.6	5.1
Faculty Practice Plan	112.1	53.7
Other Sources	9.2	4.4
Total Revenues:	$208.9	100.0%
Expenses		
Instruction and Research Training	14.0	6.7
Research	44.1	21.1
Libraries and Academic Support	3.4	1.6
Student Services and Student Financial Aid	6.6	3.2
General and Administrative Support	13.1	6.3
Plant Operations	7.6	3.7
Faculty Practice Plan	107.8	51.6
Debt Service	1.0	0.4
Other Expenses and Transfers	11.3	5.4
Total Expenditures:	$208.9	100.0%

Statistical Summary 1989

Services to Patients	Laboratory	2,923,664
	Blood Bank	210,842
	Radioisotopes Services	74,202
	X-Ray Examinations	141,330
	Operations	21,718
	Deliveries	3,491
	Electrocardiograms	74,798
	Electroencephalograms	3,292
	Social Services Interviews	376,358
	Therapy Treatments (Physical, Occupational, Recreational)	271,690
	Transfusions	29,774
	Pharmacy Prescriptions	2,602,927
	Record Room-New Case Records	45,443
	Average Number of Full-Time Employees	5,972

Distribution of Beds	**Private**	
	Baker-Medicine	77
	Baker-Surgery	40
	Obstetrics and Gynecology	29
	Pediatrics	5
	Total Private	151
	Semi-Private	
	Medical/Surgical	465
	Two-Bed Baker-Medicine	64
	Two-Bed Baker-Surgery	33
	Urology	24
	Obstetrics and Gynecology	96
	Pediatrics	107
	Total Semi-Private	789
	Sub-Total Manhattan Division	940
	Newborn Bassinets	44
	Payne Whitney Clinic	108
	Total Manhattan Division	1,092
	The Westchester Division	322
	Grand Total	1,414

Patient Care	Patients Admitted Manhattan Division	33,693
	Newborn	3,522
	Payne Whitney Psychiatric Clinic	1,128
	The Westchester Division	1,645
	Total	39,988
	Patient Days, All Divisions Including Newborn	431,552
	Visits to Day Hospital	11,989
	Visits to Outpatient Clinics	162,283
	Visits to Emergency Pavilion	55,041

Educational Program

Medical Students	391
Graduate Students	180
M.D.-Ph.D. Students *(medical and graduate enrollments)*	68
Degrees Conferred *(1988-89 academic year)*	108
M.D.	94
Ph.D.	14
Faculty *(including all affiliates—1988-89 academic year)*	3,109
Full-Time	1,407
Part-Time	53
Voluntary	1,649
Clinical Fellows	142
House Staff *(NYH-CMC only)*	524
Health-Related Students:	
Dental Hygienists	3
Dietetic Interns	15
Emergency Medical Technicians	38
Medical Social Workers	11
Surgical Assistants	26
Samuel J. Wood Library *(1988-89 academic year)*	
Visits	295,835
Journals (titles)	1,684
Total Volumes	145,819
New Books Received	1,343

Profile of Entering Medical Students September 1989

(101 admitted out of total applicant pool of 4,392)

Men	59
Women	42
Minorities	15
New York State Residents	51
College Majors	Science (73); Non-Science (28)
Mean Grade Point Average	3.5
Average Age	22.3
Age Range	20-35
Universities with Three or More Graduates Admitted:	
Cornell	25
Harvard	6
Yale	6
Dartmouth	5
Brown	4

Research

(July 1, 1988—June 30, 1989)

Federally Sponsored Research *(including fellowship and research training)*—Total Funding	$44,579,318
Privately Sponsored Research—Total Funding	$20,090,012
Research Projects Funded—New and Renewals	324

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Lura Cook Hull Trust
Estate of Madeline Kaufman
T/U/W Elise Strang L'Esperance
Estate of Laura M. Lambert
Estate of Jeannette C. Light
T/U/W Estelle A. Manning
Estate of Shirley Marshak
Estate of Ellen N. Matthews
T/U/W Jean Mauze
Estate of Marion McIlveen
Estate of David Ornstein
Clara Redline Trust
T/U/W Benjamin Reich
T/U/W Anne S. Richardson
T/U/W Sarah de C. Ruth
T/U/W Carolyn W. Saxe
Estate of Mary S. Schreyer
Estate of Nina Silverman
T/U/W Alexandrine Sinsheimer
T/U/W Sidney Skidell
T/U/W Arthur Sondheim
Estate of Theodate H. Soule
Estate of Martha Souter
T/U/W May Strang
Estate of Joseph T.P. Sullivan
T/U/W Frederick L. Upjohn
Estate of Alice E. Van Orden
Estate of Alvina Walters
T/U/W Monique Weill Caulier
T/U/W Arthur Williams
Estate of Dorothy M. Wood
T/U/W Philip G. Woodward
Estate of Marie Yarosh

Auxiliary

The auxiliary began as the Social Services Committee, founded in 1912 by the wives of three hospital governors. As its activities expanded beyond social service, the committee became the Women's Auxiliary of the Society of the New York Hospital and later simply the "auxiliary."

During the past year, the auxiliary donated $257,000 to the New York Hospital and to hospital community projects. Income was derived from contributions, membership dues, television rentals, and sales at the auxiliary's gift shop in the hospital lobby and its thrift shop at 439 East 71st Street. A Halloween benefit raffle netted $50,000.

Major donations went to the following programs:

- Teenage Pregnancy and Parenting Program, a joint effort of the departments of obstetrics and gynecology and public health.
- Refurbishing of the New York Hospital Clinic at the Stanley M. Isaacs Neighborhood Center on East 93rd Street.
- Refurbishing of the hospital admitting office.
- Upgrading of electrocardiography equipment on all medical floors.

The auxiliary continued to support the Volunteer Services for the Elderly of Yorkville, as it has for many years, and for the third straight year provided funding to the New York Hospital methadone clinic to enable eight needy children to go to summer camp. In other continuing benefactions, the auxiliary funded publication of a New York Hospital page that appears quarterly in the newspaper *Our Town* and furnished support to the diversional crafts program of the hospital's department of rehabilitation medicine.

Volunteers

At a time when health care faces more challenges than ever, the assistance of good volunteers is critical to the quality of patient care. In 1989, many volunteers were called upon to give more of their time and talents. As always, they came through whenever and wherever they were needed.

Last year 619 volunteers contributed 61,235 hours of service in 144 hospital departments or programs. Many departments have come to depend on volunteers and to view them as an integral part of the departments' functioning.

A few examples of the difference volunteers make: in pediatrics, volunteers gave 7,886 hours, in admitting 4,101 hours, in the Payne Whitney Clinic 3,772 hours, in the patients library 2,905 hours, in the hospital thrift shop 2,796 hours, and in AIDS programs 2,659 hours.

Awards for levels of service achieved by year's end included the following:

30 years
Rosita Maldonado

25 years
Anne Joyce

15 years
Kathryn Oppenheimer

10 years
Rita Castor
Leni Eisenberg
Paul Epstein
Evelyn Huntman
Abby O'Neil
Anne Vaughan

5 years
Margaret Acquaviva
Letitia Castellani
Rosalynne Cohen
Elizabeth Handler
Lila Kalison
Lois Kaufman
Natalie Langner
Sophie Oriel
Julie Price
Sidney Rosenblatt
Teresa Sarnoff

7,000 hours
Georgette Falco

6,000 hours
Evelyn Huntman
Rosita Maldonado
Kathryn Oppenheimer

5,000 hours
Dorothy Lear

4,000 hours
Kenneth Dorland
Paul Epstein
Lois Kaufman

3,000 hours
Rita Castor
Angeline Schillaci

2,000 hours
Nan Brownlie
Kay Devenney
Dorothy Kirschman
Abby O'Neil
Josephine Pecorino
Ruth Strassner

Professional Staff and Faculty

The New York Hospital–Cornell Medical Center represents an affiliation of the New York Hospital and Cornell University Medical College. Physicians at the medical center have appointments in both institutions.

Chiefs of service at the New York Hospital, with the exception of the physiatrist-in-chief, serve as chairmen of corresponding clinical departments of Cornell University Medical College. Physicians at the hospital have faculty appointments in the medical college. For the sake of simplicity, however, the center's clinical faculty are listed here by their hospital titles only and not by their academic titles.

In addition to the clinical departments, the center also has six basic science departments. Since the work of these departments consists almost entirely of teaching and research, many basic-science faculty do not have hospital appointments. They are, therefore, listed here by academic title.

The medical center has affiliations with a number of institutions, including the Hospital for Special Surgery, the Burke Rehabilitation Center, Memorial Sloan-Kettering Cancer Center, North Shore University Hospital, Catholic Medical Center of Brooklyn and Queens, Lenox Hill Hospital, St. Barnabas Hospital, the Will Rogers Institute, and LaGuardia Hospital. Because of space limitations, professional staff at these institutions who do not have New York Hospital appointments are not listed in the following pages.

Medical, Graduate, and Professional-Associate Staff of the New York Hospital

(January 1, 1990)

Honorary Staff

Jacob Applebaum, M.D.
Leslie L. Balazs, M.D.
William A. Barnes, M.D.
Charles H. Bauer, M.D.
Alexander G. Bearn, M.D.
Anne M. Belcher, M.D.
Dragan Borovac, M.D.
Robert W. Brown, M.D.
Eric T. Carlson, M.D.
Helen E. Daniells, M.D.
Farrington Daniels Jr., M.D.
Joseph D. Davis, D.D.S.
Paul F. de Gara, M.D.
John E. Deitrick, M.D.
Oskar Diethelm, M.D.
John W. Draper, M.D.
J. Edwin Drew, M.D.
Howard S. Dunbar, M.D.
George F. Egan, D.M.D.
Hollon W. Farr, M.D.
Samuel L. Feder, M.D.
Claude E. Forkner Sr., M.D.
Richard H. Freyberg, M.D.
Fritz Fuchs, M.D.
Harold Genvert, M.D.
Martin J. Glynn, M.D.
Edward A. Graber, M.D.
Merton L. Griswold, M.D.
Susan J. Hadley, M.D.
Francis J. Hamilton, M.D.
James Q. Haralambie, M.D.
Graham G. Hawks, M.D.
James M. Holman, M.D.
George R. Holswade, M.D.
Suzanne A. L. Howe, M.D.
Donald G. Johnson, M.D.
Richard N. Kohl, M.D.
Elmer E. Kramer, M.D.
Milton I. Levine, M.D.
William T. Lhamon, M.D.
Frederick L. Liebolt, M.D.
Wan Ngo Lim, M.D.
Mary H. Markham, M.D.
Paul A. Marks, M.D.
Victor F. Marshall, M.D.
Wallace W. McCrory, M.D.
Ellen McDevitt, M.D.
Ade T Milhorat, M.D.
George C. Mueller, M.D.
William F. Nickel, M.D.
Ralph E. Peterson, M.D.
Bronson S. Ray, M.D.
Donald J. Reis, M.D.
Walter F. Riker Jr., M.D.
David E. Rogers, M.D.
Charles A. Sanders, M.D.
John H. Seward, M.D.
Donald M. Shafer, M.D.
Alphonse E. Timpanelli, M.D.
James H. Wall, M.D.
John R. Williams, M.D.
Irving S. Wright, M.D.
Judah Zizmor, M.D.

Emeritus Staff

Seymour Advocate, M.D.
Sam C. Atkinson, M.D.
Lloyd T. Barnes, M.D.
Hermina Z. Benjamin, M.D.
Ruth P. Berkeley, M.D.
Carl A. Berntsen, M.D.
Otto E. Billo, M.D.
Jerome H. Brander, M.D.
John L. Brown, M.D.
Melva A. Clark, M.D.
Robert E. Eckardt, M.D.
Ralph A. Eskesen, M.D.
M. Freile Fleetwood, M.D.
Constance Friess, M.D.
Charles H. Goodsell, M.D.
John G. Hansen, M.D.
Leonard L. Heimoff, M.D.
Thomas F. Henley, M.D.
Thomas P. Jernigan, M.D.
Vincent A. Joy, M.D.
William H. Kammerer, M.D.
George L. Kauer Jr., M.D.
Susan A. Kline, M.D.
Herbert Koteen, M.D.
Daniel S. Lukas, M.D.
Benjamin E. Marbury, M.D.
N. Eileen McGrath, M.D.
Willis A. Murphy, M.D.
Mary Ann Payne, M.D.
Aurelia Potor, M.D.
Edgar A. Riley, M.D.
William C. Robbins, M.D.
Arthur W. Seligmann, M.D.
Harry A. Sinclaire, M.D.
Beatrice S. Slater, M.D.
Herbert J. Spoor, M.D.
Joseph D. Sullivan, M.D.
J. Russell Twiss, M.D.
Virginia Werden, M.D.

Anesthesiology

Medical Staff

Anesthesiologist-in-Chief
John J. Savarese, M.D.

Attending Anesthesiologists
Joseph F. Artusio Jr., M.D.
Raymond G. Barile, M.D.
Gabriel G. Curtis, M.D.
Herbert L. Erlanger, M.D.
Farida Gadalla, M.D.
Aileen F. Kass, M.D.
Ronald A. Leff, M.D.
Louis J. Maggio, M.D.
Vinod Malhotra, M.D.
Jerold Schwartz, M.D.
Edwina S. Sia-Kho, M.D.
David G. Susman, M.D.
Stephen J. Thomas, M.D.
Marjorie J. Topkins, M.D.
Liebert S. Turner, M.D.
Alan Van Poznak, M.D.
Judith Weingram, M.D.
Fun-Sun Yao, M.D.

Associate Attending Anesthesiologists
Pavel Illner, M.D.
Theresa T. Kudlak, M.D.

Assistant Attending Anesthesiologists
Miles H. Dinner, M.D.
Steven A. Fiamengo, M.D.
Richard H. Fine, M.D.
Jill Fong, M.D.
Matthew C. Gomillion, M.D.
Gregg S. Hartman, M.D.
Subhash Jain, M.D.
Susan Jalandoni, M.D.
Robert E. Kelly, M.D.
Alan D. Kestenbaum, M.D.
Howard D. Koff, M.D.
Jan L. Kramer, M.D.
Cynthia Ann Lien, M.D.
Howard L. Rosner, M.D.
Lori A. Rubin, M.D.
Ralph L. Slepian, M.D.

Graduate Staff

Anesthesiologists
Ahmed Abou-Taleb, M.D.
Angela D. Antonacci, M.D.
Kevin M. Barry, M.D.
Matthew R. Belmont, M.D.
Patrick B. Bownes, M.D.
Donald Burke, M.D.
Joseph L. Cristofaro, M.D.
Susan N. Epps, M.D.
Joanne Goldman, M.D.
Karen A. LeDonne, M.D.
Sheryl F. Modlin, M.D.
Onofrio Patafio, M.D.
John F. Petraglia, M.D.
Maryann R. Podraza, M.D.
Nitin K. Shah, M.D.
James P. Smyth, M.D.
Andrew L. Sternlicht, M.D.
Karl Talts, M.D.
Doreen L. Wray, M.D.

Assistant Anesthesiologists
Vincent J. DeAngelis, M.D.
Chris R. Edmonds, M.D.
Fariba Faghih, M.D.
Enrique A. Fernandez, M.D.
Manuel L. Fontes, M.D.
Mary E. Lake, M.D.
Stewart R. Leftow, M.D.
Ana Maria Lobo, M.D.
Lourdes Maldonado-Viera, M.D.
Robert J. Rosen, M.D.
Michael E. Steuer, M.D.
Esther M. Yun, M.D.

Interns
Steven Mark Drexler, M.D.
Millicent Khaw, M.D.
Joseph A. Margiotta, M.D.
Roger E. Padilla, M.D.
David S. Park, M.D.
Michael A. Spector, M.D.
Joseph Tjan, M.D.

Medicine

Medical Staff

Acting Physician-in-Chief
Charles L. Christian, M.D.

Attending Physicians
Michael H. Alderman, M.D.
Donald Armstrong, M.D.
Jeremiah A. Barondess, M.D.
David V. Becker, M.D.
Morton D. Bogdonoff, M.D.
Jeffrey S. Borer, M.D.
Michael S. Bruno, M.D.
Robert G. Campbell, M.D.
D. Martin Carter, M.D.
Eric J. Cassell, M.D.
Charles L. Christian, M.D.
Morton Coleman, M.D.
Edward D. Crandall, M.D.
R. Gordon Douglas Jr., M.D.
Murray Dworetzky, M.D.
Ralph L. Engle Jr., M.D.
Henry R. Erle, M.D.
William T. Foley, M.D.
Zvi Y. Fuks, M.D.
Marvin C. Gershengorn, M.D.
Howard Goldin, M.D.
George W. Hambrick Jr., M.D.
Peter C. Harpel, M.D.
Joseph G. Hayes, M.D.
Eric A. Jaffe, M.D.
Warren D. Johnson, M.D.
Lawrence J. Kagen, M.D.
Attallah Kappas, M.D.
B. H. Kean, M.D.
Harvey Klein, M.D.
John H. Laragh, M.D.
Nicholas T. Macris, M.D.
Aaron J. Marcus, M.D.
Klaus Mayer, M.D.
John Mendelsohn, M.D.
Henry W. Murray, M.D.
Ralph L. Nachman, M.D.
Carl F. Nathan, M.D.
Irwin Nydick, M.D.
Francis S. Perrone, M.D.
Thomas G. Pickering, M.D.
R. A. Rees Pritchett, M.D.
George G. Reader, M.D.
Marcus M. Reidenberg, M.D.
Jack Richard, M.D.
Basil Rigas, M.D.
Richard S. Rivlin, M.D.
Richard B. Roberts, M.D.

Isadore Rosenfeld, M.D.
Albert L. Rubin, M.D.
Bijan Safai, M.D.
Abdol H. Samiy, M.D.
Stephen S. Scheidt, M.D.
Lawrence Scherr, M.D.
Richard T. Silver, M.D.
Gregory W. Siskind, M.D.
C. Lynn Skelton, M.D.
James P. Smith, M.D.
Richard L. Soffer, M.D.
Herman Steinberg, M.D.
Kurt H. Stenzel, M.D.
Peter E. Stokes, M.D.
Manikkam Suthanthiran, M.D.
Henry M. Thomas III, M.D.
David D. Thompson, M.D.
Douglas P. Torre, M.D.
Lila A. Wallis, M.D.
Babette B. Weksler, M.D.
Marc E. Weksler, M.D.
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Alan Yagoda, M.D.
David Zakim, M.D.

Associate Attending Physicians

Robert S. Ascheim, M.D.
Steven A. Atlas, M.D.
Ralph A. Baer, M.D.
Daiva R. Bajorunas, M.D.
Kalman J. Berenyi, M.D.
Magdalena R. Berenyi, M.D.
Robert T. Binford Jr., M.D.
David S. Blumenthal, M.D.
Bernard H. Boal, M.D.
Richard S. Bockman, M.D.
Norman Brachfeld, M.D.
Robert L. Braham, M.D.
Barry D. Brause, M.D.
Mark S. Brower, M.D.
Donald J. Cameron, M.D.
David B. Case, M.D.
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Jhoong S. Cheigh, M.D.
James P. Christodoulou, M.D.
Vincent A. Cipollaro, M.D.
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Richard P. Cohen, M.D.
Denton S. Cox, M.D.
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Richard B. Devereux, M.D.
Lewis M. Drusin, M.D.
Adrian L. Edwards, M.D.
Edwin Ettinger, M.D.
Thomas J. Fahey Jr., M.D.
George A. Falk, M.D.
Jeffrey D. Fisher, M.D.
John E. Franklin Jr., M.D.
Steven M. Friedman, M.D.
Martin Gardy, M.D.
(leave of absence)
Allan Gibofsky, M.D.
David L. Globus, M.D.
Charles H. Goodrich, M.D.
Bruce R. Gordon, M.D.
George W. Gorham, M.D.
Barry J. Hartman, M.D.
Richard A. Herrmann, M.D.
Raymond B. Hochman, M.D.
Donald W. Hoskins, M.D.
James R. Hurley, M.D.
Julianne Imperato-McGinley, M.D.
Norman J. Isaacs, M.D.
Deborah L. Keefe, M.D.
Robert P. Kimberly, M.D.
Thomas K. C. King, M.D.
F. David Kitchin, M.D.
Paul D. Kligfield, M.D.
Ione A. Kourides, M.D.
Mary Jeanne Kreek, M.D.
Jeffrey C. Laurence, M.D.
Bruce B. Lerman, M.D.
Leo R. Lese, M.D.
Marjorie G. Lewisohn, M.D.
Daniel M. Libby, M.D.
Jerrold S. Lieberman, M.D.
Norton M. Luger, M.D.
Richard J. Mahler, M.D.
Joseph A. Markenson, M.D.
Maurie Markman, M.D.
Allen W. Mead, M.D.
David H. Miller, M.D.
Paul F. Miskovitz, M.D.
Anne Moore, M.D.
Dattatreyudu Nori, M.D.
Stephen A. Paget, M.D.
Mark Pasmantier, M.D.
Mark S. Pecker, M.D.
David N. Posnett, M.D.
Philip G. Prioleau, M.D.
Lawrence M. Resnick, M.D.
Charles Ressler, M.D.
Robert R. Riggio, M.D.
Thomas N. Roberts, M.D.
Emmanuel Rudd, M.D.
Stuart D. Saal, M.D.
Jane E. Salmon, M.D.
Robert A. Schaefer, M.D.
Leonard H. Schuyler, M.D.
Gillian M. Shepherd, M.D.
Raymond L. Sherman, M.D.
Moshe Shike, M.D.
Gerald M. Silverman, M.D.
Rosemary Soave, M.D.
Henry A. Solomon, M.D.
Lawrence S. Sonkin, M.D.
Irving M. Spitz, M.B.,B.Ch.
Charles R. Steinberg, M.D.
Carol Storey-Johnson, M.D.
John F. Sullivan, M.D.
Andrew John Szabo, M.D.
Luis Tapia, M.D.
Clinton G. Weiman, M.D.
Alan M. Weinstein, M.D.
Aaron O. Wells, M.D.
Michael J. Wolk, M.D.
Michael A. Zullo, M.D.

Assistant Attending Physicians

Siddhartha A. Acharya, M.D.
Alberto M. Acosta, M.D., Ph.D.
Kathy L. Ales, M.D.
David M. Allen, M.D.
(leave of absence)
Olivier P. Ameisen, M.D.
Louis J. Aronne, M.D.
Eduardo E. Arreaza, M.D.
Adam Asch, M.D.
Phyllis August, M.D.
Charles L. Bardes, M.D.
Carol G. Baum, M.D.
Paul M. Belsky, M.D.
Bry Benjamin, M.D.
Gregory I. Berk, M.D.
Nina Bhardwaj, M.D.
James A. Blake, M.D.
Dennis A. Bloomfield, M.D.
Jon D. Blumenfeld, M.D.
Mitchell J. Blutt, M.D.
Leona Brenner-Gati, M.D.
David J. Brillon, M.D.
Michael C. Cantor, M.D.
Bruce D. Charash, M.D.
Dominick R. Chiarieri, M.D.
Paul J. Chrzanowski, M.D.
Sheryl D. Clark, M.D.
C. Stephen Connolly, M.D.
Bradley A. Connor, M.D.
Robert B. Cooper, M.D.
Andrew Costin, M.D.
Andrew J. Dannenberg, M.D.
Iris L. Davis, M.D.
Paul J. Deutsch, M.D., Ph.D.
Kathleen B. Downey, M.D.
Andrew J. Drexler, M.D.
Joseph C. Dreyfus III, M.D.
Richard H. Dyckman, M.D.
Alan D. Egelman, M.D.
George C. Ellis, M.D.
Glenn H. Englander, M.D.
Christopher C. Enu, M.D.
Gulchin A. Ergun, M.D.
Jay A. Erlebacher, M.D.
Orli R. Etingin, M.D.
Daniel E. Fass, M.D.
Joseph Feldschuh, M.D.
Jose L. Fernandez, M.D.
Theodore Fields, M.D.
Susan Fishbein, M.D.
Laura L. Fisher, M.D.
Richard M. Fuchs, M.D.
Mitchell L. Gaynor, M.D.
David M. Gelmont, M.D.
Barbara R. Gerling, M.D.
Michael F. Giordano, M.D.
Joel S. Gitlin, M.D.
Denise Fabiola Glickman, M.D.
Harvey L. Goldberg, M.D.
Richard S. Goldweit, M.D.
Susan M. Goodman, M.D.
Alice B. Gottlieb, M.D., Ph.D.
William R. Griffo, M.D.
Harry L. Gruenspan, M.D.
Lucinda A. Harris, M.D.
Catherine C. Hart, M.D.
David C. Helfgott, M.D.
Arthur D. Heller, M.D.
Barbara L. Hempstead, M.D.
Edmund M. Herrold, M.D.
Clare Hochreiter, M.D.
(leave of absence)
John L. Ho, M.D.
James P. Hollenberg, M.D.
Scott Ingber, M.D.
Barton Inkeles, M.D.
Lawrence A. Inra, M.D.
Jonathan L. Jacobs, M.D.
Ira M. Jacobson, M.D.
Charles I. Jarowski, M.D.
Michael K. Jason, M.D.
Kenneth R. Kafka, M.D.
Mazen Kamen, M.D.
Alan S. Katz, M.D.
Lawrence A. Katz, M.D.
Robert O. Kenet, M.D., Ph.D.
(leave of absence)
Elliot Robert Klaw, M.D.
Ludwig Klein, M.D.
Barry J. Klyde, M.D.
Michael J. Koren, M.D.
Kenneth R. Krauss, M.D.
Joel M. Kupfer, M.D.
Oscar L. Laskin, M.D.
George B. Leber, M.D.
Shirley J. Lee, M.D.
Larry Lerner, M.D.
Marjorie R. Levitan, M.D.
Jane Levitt, M.D.
Brian L. Levy, M.D.
Margaret Lewin, M.D.
Eric S. Lichtenstein, M.D.
Howard M. Likier, M.D.
Anne S. Lincoff, M.D.
George V. Lombardi, M.D.
Jorge A. Lopez-Ovejero, M.D.
Richard L. Lubman, M.D.
C. Ronald MacKenzie, M.D.
Norman Magid, M.D.
Steven K. Magid, M.D.
Samuel J. Mann, M.D.
Stephen J. Margulis, M.D.
Stephen J. Marks, M.D.
Franklin Marsh Jr., M.D.
Robert J. Mascitelli, M.D.
Susan I. Matos-Cloke, M.D.
Carl McDougall, M.D.
George A. McLemore Jr., M.D.
Ellen M. Mellow, M.D.
George A. Mensah, M.D.
Carlyle H. Miller, M.D.
Ilene J. Miller, M.D.
Elizabeth C. Muss, M.D.
Jerry Nagler, M.D.
Thomas W. Nash, M.D.
Jeffry L. Nestler, M.D.
Jeffrey N. Nichols, M.D.
John P. Nicholson, M.D.
Paul M. Nonkin, M.D.
Richard S. Novitch, M.D.
Martin Nydick, M.D.
Peter M. Okin, M.D.
Thomas W. Pappas, M.D.
(leave of absence)
Benjamin B. Park, M.D.
Edward J. Parrish, M.D.
Martin Perlin, M.D.
Martin R. Post, M.D.
Jacek J. Preibisz, M.D.
Joanne Puccio, M.D.
Allen R. Radin, M.D.
Deborah L. Raice, M.D.
(leave of absence)
Elizabeth Ramos, M.D.
(leave of absence)
Lonny Reisman, M.D.
Gene D. Resnick, M.D.
Marcos Rivelis, M.D.
Arnold M. Rochwarger, M.D.
John S. Rodman, M.D.
Mary J. Roman, M.D.
Patricia M. Romano, M.D.
Michael A. Rosenbluth, M.D.
Elisabeth L. Rosenthal, M.D.
Albert M. Ross, M.D.
Joseph T. Ruggiero, M.D.
Diana Santini, M.D.
Robert L. Savillo, M.D.
Frederic L. Sax, M.D.
Lawrence L. Scharer, M.D.
Michael J. Schmerin, M.D.
Steven J. Schneider, M.D.
Melissa P. Schori, M.D.
Sergio Schwartzman, M.D.
Kenneth P. Scileppi, M.D.
Rachelle A. Scott, M.D.
Kent A. Sepkowitz, M.D.
Inna Serebnitsky, M.D.
Alexander Shaknovich, M.D.
Kumar Sharma, M.D.
Christopher Shen, M.D.
Morris A. Shorofsky, M.D.
Roy L. Silverstein, M.D.
Jerome Simson, M.D.
Clayton A. Smith, M.D.
Charles Smithen, M.D.
Alan G. Snart, M.D.
Meyer N. Solny, M.D.
Martin Sonenberg, M.D.
Julio E. Sotelo, M.D.
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Michael G. Sension, M.D.
Rampaul G. Singh, M.D.
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Michael R. Tendler, M.D.
Megan Mae Terwilliger, M.D.
David J. Vaughn, M.D.
John A. Venditto, M.D.
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Robert D. Campagna, M.D.
Roger V. Cappucci, M.D.
Maureen T. Connelly, M.D.
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Susan E. Dozier, M.D.
Francis J. Fahey, M.D.
Jack L. Flyer, M.D.
Renee Frankel, M.D.
Jennifer H. Goldwasser, M.D.
Martee Leigh Hensley, M.D.
Heidi S. Hutter, M.D.
Diane W. Inserra, M.D.
Anthony B. Ilton, M.D.
Adam D. Jarrett, M.D.
Arielle N. Kauvar, M.D.
Lisa Klein, M.D.
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Glenn S. Kroog, M.D.
Paul J. Lama, M.D.
Paul J. Lee, M.D.
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Mitchell Machtay, M.D.
Shari R. Midoneck, M.D.
David H. Montgomery, M.D.
Patricia L. Murphy, M.D.
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Joseph M. Raffaele, M.D.
Paul F. Riska, M.D.
Rita M. Rossi-Foulkes, M.D.
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Neurology

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Mark S. Horwich, M.D.
Gerald H. Klingon, M.D.
David E. Levy, M.D.
Frank A. Petito, M.D.
John A. Schaefer, M.D.
Gail E. Solomon, M.D.
Peter Tsairis, M.D.
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Joelle Mast, M.D.
Paul L. Moots, M.D.
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Russell K. Portenoy, M.D.
Samuel Rapoport, M.D.
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Norman R. Relkin, M.D.
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Benjamin M. Segal, M.D.
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Obstetrics and Gynecology

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Ophthalmology

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Otorhinolaryngology

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Alvin Katz, M.D.
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William I. Kuhel, M.D.
Thomas C. McLure III, M.D.
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Pathology

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Charles A. Santos-Buch, M.D.
Carl F. W. Wolf, M.D.

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Philip G. Prioleau, M.D.
Joseph L. Rayburn, M.D.
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Pediatrics

Medical Staff

Pediatrician-in-Chief
Maria I. New, M.D.

Attending Pediatricians
Peter A. M. Auld, M.D.
Kathryn H. Ehlers, M.D.
Mary Allen Engle, M.D.
James L. German III, M.D.
Margaret W. Hilgartner, M.D.
Arthur A. Klein, M.D.
Alfred N. Krauss, M.D.
Aaron R. Levin, M.D.
Florence N. Marshall, M.D.
Rebecca F. Notterman, M.D.
Richard J. O'Reilly, M.D.
George M. Owen, M.D.
Hart de C. Peterson, M.D.
Irwin Rappaport, M.D.
Alfred L. Scherzer, M.D.
Mervin Silverberg, M.D.
David I. Smith, M.D.
Charlotte T. C. Tan, M.D.

Attending Psychiatrist
Theodore Shapiro, M.D.

Attending Radiologist
Patricia Winchester, M.D.

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Richard R. Bass, M.D.
Arthur E. Brown, M.D.
James B. Bussel, M.D.
Benedict S. Caterinicchio, M.D.
Leon I. Charash, M.D.
Fredric Daum, M.D.
Jessica G. Davis, M.D.
Alan P. DeMayo, M.D.
Paul J. Edelson, M.D.
Alvin N. Eden, M.D.
Murray Engel, M.D.
John J. Ferry Jr., M.D.
Zulema Fischbarg, M.D.
William W. Frayer, M.D.
Joseph M. Gertner, M.B.,B.Ch.
Fereshteh Ghavimi, M.D.
Patricia-Jane Giardina, M.D.
Fred Gilbert, M.D.
Eric F. Grabowski, M.D.
Katherine A. Hajjar, M.D.
Daniel B. Kessler, M.D.
Thomas J. A. Lehman, M.D.
Rudolph L. Leibel, M.D.
Ralph I. Lopez, M.D.
Andrea Marks, M.D.
Paul A. Meyers, M.D.
Ruth D. Nass, M.D.
Karl Neumann, M.D.
Bertrand L. New, M.D.
John E. O'Loughlin, M.D.
Irwin E. Redlener, M.D.
Melvin S. Rosh, M.D.
Ingrid K. Rosner, M.D.
Myles S. Schiller, M.D.
William T. Seed, M.D.
Gail E. Solomon, M.D.
Josef Soloway, M.D.
Laurel J. Steinherz, M.D.
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Nancy A. Kernan, M.D.
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Howard Lantz, M.D.
Nina Louie Lau, M.D.
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Meryl F. Newman-Cedar, M.D.
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Dorothy M. Pietrucha, M.D.
Eric Sin-Kam Poon, M.D.
Edna Anne Pytlak, M.D.
Arlene Redner, M.D.
Reuben H. Reiman, M.D.
Roy J. Rodrigues, M.D.
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Andrew S. Rosenblum, M.D.
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Cecelia A. Slater, M.D.
Trudy N. Small, M.D.
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Gerald M. Spielman, M.D.
Joel Steckelman, M.D.
Ralph Stein, M.D.
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Robert Rapaport, M.D.
Ladd Spiegel, M.D.
Ernest B. Visconti, M.D.
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Robert E. Rosenberg, M.D.
Rigmor E. Spang, M.D.
Kathleen D. Stokes, M.D.
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Susan Barasch, M.D.
Elizabeth M. Calleja, M.D.
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Mary T. Donofrio, M.D.
Maria L. Fabre, M.D.
Glenn Flores, M.D.
Lance R. Goodman, M.D.
Ciro T. Grello, M.D.
Sima A. Habibi, M.D.
Grace Kim, M.D.

Christine A. Lambiris, M.D.
Leora Lanzkowsky, M.D.
Paul J. Lee, M.D.
Lenora M. Noroski, M.D.
Shari L. Platt, M.D.
Lisa I. Robbins, M.D.
Rita M. Rossi-Foulkes, M.D.
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Psychiatry

Medical Staff

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H. Robert Blank, M.D.
Arnold M. Cooper, M.D.
Aaron H. Esman, M.D.
Frederic F. Flach, M.D.
Allen J. Frances, M.D.
Lawrence Friedman, M.D.
William A. Frosch, M.D.
Sheldon Gaylin, M.D.
James G. Gibbs Jr., M.D.
Ira D. Glick, M.D.
Sidney S. Goldensohn, M.D.
Katherine A. Halmi, M.D.
Jimmie C. B. Holland, M.D.
Richard A. Isay, M.D.
Helen S. Kaplan, M.D.
Otto F. Kernberg, M.D.
Gerald L. Klerman, M.D.
James F. Masterson, M.D.
Rene C. Mastrovito, M.D.
Robert B. Millman, M.D.
Wayne A. Myers, M.D.
Samuel W. Perry III, M.D.
Cynthia R. Pfeffer, M.D.
Jacques M. Quen, M.D.
Clifford J. Sager, M.D.
Charles A. Shamoian, M.D.
Theodore Shapiro, M.D.
Stefan P. Stein, M.D.
Peter E. Stokes, M.D.
Milton Viederman, M.D.

Attending Psychiatrist (Behavioral Science)
Gerard P. Smith, M.D.

Attending Physician
Abdol H. Samiy, M.D.

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Gerard Addonizio, M.D.
George S. Alexopoulos, M.D.
Ann H. Appelbaum, M.D.
John M. Astrachan, M.D.
Bruce L. Ballard, M.D.
Hyam Bolocan, M.D.
Alexander R. Broden, M.D.
J. Warren Brown, M.D.
Ruth D. Bruun, M.D.
Edwin H. Church, M.D.
John F. Crow, M.D.
E. Gerald Dabbs, M.D.
Andre Dupuis, M.D.
Stuart R. Edelson, M.D.
Morton S. Eisenberg, M.D.
Alice K. Frankel, M.D.
Mio Fredland, M.D.
Rodman Gilder, M.D.
Richard Glass, M.D.
Roger B. Granet, M.D.
Robert S. Grayson, M.D.
Fady Hajal, M.D.
Lawrence J. Hatterer, M.D.
Margaret E. Hertzig, M.D.
Malcolm Hill, M.D.
Peter T. Janulis, M.D.
Thomas P. Kalman, M.D.
Saul E. Kapel, M.D.
Marilyn G. Karmason, M.D.
Paulina F. Kernberg, M.D.
M. Dorothea Kerr, M.D.
Howard D. Kibel, M.D.
Ari Kiev, M.D.
James H. Kocsis, M.D.
Harold W. Koenigsberg, M.D.
L. Gerald Laufer, M.D.
Marguerite S. Lederberg, M.D.
Henry J. Lefkowits, M.D.
Alfred B. Lewis, M.D.
Edward Y. Liang, M.D.
Edgar L. Lipton, M.D.
Laurence Loeb, M.D.
Mary Jane Massie, M.D.
Marlin R. Mattson, M.D.
Barnett S. Meyers, M.D.
Frank T. Miller, M.D.
Saverio G. Mortati, M.D.
Richard L. Munich, M.D.
Bertrand L. New, M.D.
James E. Nininger, M.D.
Yehuda Nir, M.D.
Winfred Overholser, M.D.
Joshua M. Perman, M.D.
Richard Rabkin, M.D.
Lawrence H. Rockland, M.D.
Michael H. Sacks, M.D.
Jesse Schomer, M.D.
Michael A. Selzer, M.D.
Sally K. Severino, M.D.
David A. Shapiro, M.D.
M. Katherine Shear, M.D.
James H. Spencer Jr., M.D.
Tom G. Stauffer, M.D.
Jorge Steinberg, M.D.
John J. Stine, M.D.
Norman Straker, M.D.
Virginia Susman, M.D.
Charles R. Swenson, M.D.
John S. Tamerin, M.D.
Kenneth Tardiff, M.D.
Kenneth G. Terkelsen, M.D.
Jack Terry, M.D.
Daniel Weitzner, M.D.
Peter G. Wilson, M.D.
Charles Winkelstein, M.D.
Robert C. Young, M.D.

Associate Attending Neurologists
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Gail E. Solomon, M.D.

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Robert C. Ascher, M.D.
Elizabeth L. Auchincloss, M.D.
Sarah S. Auchincloss, M.D.
Ralph Baker, M.D.
Alan Barasch, M.D.
Joseph Barbuto, M.D.
Judith L. Berg, M.D.
Robert J. Berlin, M.D.
Marvin B. Blitz, M.D.
Joerg Bose, M.D.
William Breitbart, M.D.
Lynne M. Brody, M.D.
Ross B. Brower, M.D.
William Burten, M.D.
Thomas A. Butler, M.D.
Giovanni Caracci, M.D.
Robert Catenaccio, M.D.
Theodore Cherbuliez, M.D.
Irene Chiarandini, M.D.
Cornelius J. Clark, M.D.
Donald Cohen, M.D.
Ruth Cohen, M.D.
Howard N. Cooper, M.D.
Moitri Nath Datta, M.D.
Helen Davidoff-Hirsch, M.D.
Paolo Decina, M.D.
Joseph A. Deltito, M.D.
Cheryl B. Diamond, M.D.
Leonard Diamond, M.D.
(leave of absence)
Mary V. DiGangi, M.D.
Jane B. Doller, M.D.
Nathaniel Donson, M.D.
Thomas L. Doyle Jr., M.D.
Jack Dunietz, M.D.
Eli Einbinder, M.D.
Sheldon Eisenman, M.D.
Daniel Feinberg, M.D.
Vivian Fromberg, M.D.
Minna R. Fyer, M.D.
Stewart Gabel, M.D.
Richard E. Gallagher, M.D.
Charles S. Gardner, M.D.
Bruce Gilbert, M.D.
Karen Gilmore, M.D.
Margaret M. Gilmore, M.D.
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Tsilia Glinberg, M.D.
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Edward L. Greene, M.D.
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Lawrence E. Grolnick, M.D.
H. Omar Gutierrez, M.D.
Marion G. Hart, M.D.
Stephen P. Herman, M.D.
Daniel N. Hertz, M.D.
Richard K. Hill, M.D.
Leon Hoffman, M.D.
Karen Hopenwasser, M.D.
Hans F. Huebner, M.D.
Irene G. Hyler, M.D.
(leave of absence)
George D. Igel, M.D.
Pamela S. Ingber, M.D.
Lawrence Jacobsberg, M.D.
Richard Kaiser, M.D.
Balkrishna Kalayam, M.D.
Norman L. Kaplan, M.D.
Richard D. Kaplan, M.D.
Nathaniel P. Karush, M.D.
Ruth K. Karush, M.D.
Kevin V. Kelly, M.D.
Hae A. Kim, M.D.
Kenneth S. Kirstein, M.D.
Allison B. Landolt, M.D.
Keith A. Lepp, M.D.
Lynna M. Lesko, M.D.
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Arthur Lew, M.D.
Bruce A. Lieberman, M.D.
Dorothy Lieberman, M.D.
Jerome H. Liebowitz, M.D.
Leslie S. Linet, M.D.
Stanley Lituchy, M.D.
Erica M. Loutsch, M.D.
M. Philip Luber, M.D.
John J. Lucas Jr., M.D.
James L. Maher Jr., M.D.
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John C. Markowitz, M.D.
P. Anne McBride, M.D.
James M. McGowan, M.D.
Edith McNutt, M.D.
Norman S. Miller, M.D.
Robert J. Mitchell, M.D.
Ahmed Mobarak, M.D.
Ildiko Mohacsy, M.D.
Leonard M. Moss, M.D.
Abbas D. Nahas, M.D.
Draupathi E. Nambudiri, M.D.
Michael J. Napoliello, M.D.
Edward Nersessian, M.D.
Ronald Neschis, M.D.
E. Scott Nininger, M.D.
Henry Nunberg, M.D.
Barbara E. O'Connell, M.D.
Avodah K. Offit, M.D.
Lynda M. Parker, M.D.
Edward L. Parsons, M.D.
John T. Patten, M.D.
Sherman S. Pazner, M.D.
Vivian S. B. Pender, M.D.
Mervyn M. Peskin, M.D.
Nancy M. Peters, M.D.
Ellen R. Peyser, M.D.
Arthur Phillips, M.D.
H. Jonathan Polan, M.D.
Edwin L. Rabiner, M.D.
Aylin Radomisli, M.D.
David B. Robbins, M.D.
Jay B. Rohrlich, M.D.
Steven Gary Ross, M.D.
Steven D. Roth, M.D.
Ellen B. Rowntree, M.D.
Mark Rubinstein, M.D.
Gary H. Rusk, M.D.
Mark J. Russ, M.D.
Eslee Samberg, M.D.
George K. Samios, M.D.
Barry J. Saul, M.D.
Jonah W. Schein, M.D.
Joan Schmugler, M.D.
Arthur H. Schore, M.D.
Beth J. Seelig, M.D.
Edward E. Seelye, M.D.
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Robert Silbert, M.D.
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Mark A. Spiegel, M.D.
Max Spital, M.D.
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Timothy B. Sullivan, M.D.
Lisa Tallal, M.D.
Joan Tolchin, M.D.
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Phillip Lee, M.D.
Elena G. Lister, M.D.
Philip N. Lister, M.D.
Andrew N. Looker, M.D.
Ruth Lubelski, M.D.
Judith Lusic, M.D.
John C. Mahler Jr., M.D.
Deborah B. Marin, M.D.
Peter M. Marzuk, M.D.
Richard H. McCarthy, M.D.
Barry A. Meisel, M.D.
Prakash Merai, M.D.
William J. Miles, M.D.
Indu Mirchandani, M.B.,B.S.
Charles J. Morosini, M.D.
John B. Moses, M.D.
Stuart T. Nevins, M.D.
Piero O. Niceta, M.D.
Mark Olfson, M.D.
Sharone Ornstein, M.D.
Alison Orr-Andrawes, M.D.
Lawrence D. Orvieto, D.D.S.
Avtandil Papiasvili, M.D.
Samuel L. Pauker, M.D.
Edward M. Paul, M.D.
Paul Pechman, M.D.
David Pelino, M.D.
Shubha Sinha Phansalkar, M.D.
Dionne R. Powell, M.D.
Leslie Prusnofsky, M.D.
John A. Ramsdell, M.D.
Anthony O. Rebholz Jr., D.M.D.
Jean Roiphe, M.D.
Phillip E. Romero, M.D.
Margot S. Rubinstein, M.D.
Marie G. Rudden, M.D.
Gyorgy A. Sagi, M.D.
Larry S. Sandberg, M.D.
Elissa M. Sanders, M.D.
Michael B. Saul, D.M.D.
David H. Sawyer, M.D.
Lynn Schackman, M.D.
Mark A. Scher, M.D.
Ann W. Schongalla, M.D.
Ann P. Sellew, M.D.
Ludovit Sevcik, M.D.
Mary Sickles, M.D.
Howard B. Simon, M.D.
Lisa Sinsheimer, M.D.
Thomas E. Smith, M.D.
Ladd Spiegel, M.D.
Simon M. Trutt, M.D.
Traer Van Allen, M.D.
Heidi Van Bellingham, M.D.
Mary G. Versfelt, M.D.
Valentina von der Mosel, M.D.
Carol W. Weinstein, M.D.
David J. Weiser, M.D.
Carol J. Weiss, M.D.
Renee Welner, M.D.
Philip J. Wilner, M.D.
Charles Duncan Wright, M.D.
Donna D. Yi, M.D.

Clinical Affiliate (Anesthesiology)
Joel Greenspan, M.D.

Clinical Affiliate (Orthopedic Surgery)
Eric K. Zitzmann, M.D.

Professional-Associate Staff

Attending Psychologists
Michael Beldoch, Ph.D.
John F. Clarkin, Ph.D.
Herbert Fensterheim, Ph.D.
Walter Kass, Ph.D.
Lee Salk, Ph.D.
Herbert J. Schlesinger, Ph.D.

Associate Attending Psychologists
Anna M. Antonovsky, Ph.D.
Gilbert J. Botvin, Ph.D.
M. David Clayson, Ph.D.
Gretchen L. Haas, Ph.D.
Stephen W. Hurt, Ph.D.
Herbert H. Krauss, Ph.D.
Jay S. Kwawer, Ph.D.
Bernard Landis, Ph.D.
Ruth F. Lax, Ph.D.
Armand W. Loranger, Ph.D.
Steven Mattis, Ph.D.
Melvin Muroff, Ph.D.
Michel Radomisli, Ph.D.
William H. Redd, Ph.D.
John M. Ross, Ph.D.
Fred Schwartz, Ph.D.
Muriel C. Winestine, Ph.D.
Muriel Zimmerman, Ph.D.

Assistant Attending Psychologists
William H. Berman, Ph.D.
June E. Blum, Ph.D.
Thomas B. Boland, Ph.D.
Susan Bram, Ph.D.
Betty Buchsbaum, Ph.D.
Monica Carsky, Ph.D.
Audrey J. Clarkin, Ph.D.
Martin V. Cohen, Ph.D.
Jonas Cohler, Ph.D.
Peter Deri, Ph.D.
Louis J. DeStefano, Ph.D.
Katie Eisenstadt, Ph.D. (leave of absence)
Jerome L. Fine, Ph.D.
Baruch Fishman, Ph.D.
Mary M. Fitzpatrick, Ph.D.
Howard I. Glazer, Ph.D.
George Greenberg, Ph.D.
Edward R. Greenblatt, Ph.D.
James W. Hull, Ph.D.
Paul B. Jacobsen, Ph.D.
Stephen C. Josephson, Ph.D.
Priscilla F. Kauff, Ph.D.
Jerry Lanoil, Ph.D.
Zoe L. Lazar, Ed.D.
Alexander H. Levi, Ph.D.
David A. Lord, Ph.D.
I. Barry Lorinstein, Ph.D.
Barbara J. Mason, Ph.D.
Eric Mendelsohn, Ph.D.
Sharon G. Nathan, Ph.D.
Edna C. Ortof, Ph.D.
Michael A. Perelman, Ph.D.
William Picker, Ph.D.
Stephen Reich, Ph.D.
James C. Rembar, Ph.D.
Gail Ross, Ph.D.
Michael G. Rothenberg, Ph.D.
Edward J. Schork Jr., Ph.D.
Margaret E. Snow, Ph.D.
Roger J. Sowala, Ph.D.
John A. Sweeney, Ph.D.
Susan Tross, Ph.D.
Lyle Tucker, Ph.D.
Alan S. Weiner, Ph.D.
Jonathan H. Weiss, Ph.D.
Jutta V. Weiss, Ph.D.

Professional Associates (Psychology)
Elvira G. Aletta, Ph.D.
Kenneth Barish, Ph.D.
Jane Bloomgarden, Ph.D.
Saralea E. Chazan, Ph.D.
Neill S. Cohen, Psy.D.
Roni O. Cohen, Ph.D.
Anne K. Criticos, Ph.D.
Diana Diamond, Ph.D.
Jeanne C. Dietrich, Ph.D.
Alan F. Dubro, Ph.D.
Carolyn Feigelson, Ph.D.
Priscilla H. Fishler, Ph.D.
Barbara L. Flye, Ph.D.
William L. Golden, Ph.D.
Meredith Gould, Ph.D.
Melanie A. Katzman, Ph.D.
Sharon Kofman, Ph.D.
Robert S. Kruger, Ph.D.
Anna C. Lee, Ph.D.
Mary A. Luallen, Ph.D.
Harriet N. Mischel, Ph.D.
Julia Howe Rowland, Ph.D.
Cynthia J. Sanderson, Ph.D.
Martin N. Seif, Ph.D.
Eric D. Shaw, Ph.D.
Susan Wagner, Ph.D.

Professional Associates (Psychiatry)
Louise Crandall, M.S.W.
Bonnie Gitlin, M.S.W.
Ruth K. Goodman, M.S.W.
Elaine Kleinbart, M.S.W.
Edythe H. Mencher, M.S.W.
Verena Michels, M.S.W.
Arlene Novick, M.S.W.
Mary Jenness Raine, M.S.W.
Saul D. Raw, M.S.W.
Estelle T. Rosen, M.S.W.
Doris M. Sisley, M.S.W.
Frances D. Thurston, M.S.W.
Phyllis Urman-Klein, Ph.D.

Professional Associate (Podiatry)
John Cappa, D.P.M.

Graduate Staff, Payne Whitney Psychiatric Clinic

Clinical Fellows
Roger Cambor, M.D.
Dario LaRocca, M.D.
Jon A. Levenson, M.D.

Psychiatrist
Martin Wilner, M.D.

Assistant Psychiatrists (Child Psychiatry)
Beth P. Abrams, M.D.
Tamela M. Amiri, M.D.
Douglas S. Feltman, M.D.
Laura V. Rodriguez-Frank, M.D.
Ellen K. Schlefer, M.D.
Audrey M. Walker, M.D.

Assistant Psychiatrists
Karen A. Abrams, M.D.
Lori Adel, M.D.
Stewart L. Adelson, M.D.
Linda C. Barr, M.D.
Lawson F. Bernstein Jr., M.D.
Amy Lynn Bloch, M.D.
Jane I. Epstein, M.D.
Ann O. S. Fels, M.D.
Emily Finkelstein, M.D.
Julie L. Fudge, M.D.
Elizabeth H. Gery, M.D.
Robert G. Goldstein, M.D.
Julia A. Golier, M.D.
Daniel W. Goodman, M.D.
Jeanne E. Greenblatt, M.D.
Anne McLean Griffin, M.D.
Leonard C. Groopman, M.D.
Barri L. Katz, M.D.
John Lauriello, M.D.
George J. Makari, M.D.
Daniel C. Mierlak, M.D., Ph.D.
David A. Mitnick, M.D.
Mitchell D. Newmark, M.D.
Ann B. Oribe, M.D.
Robert J. Penzer, M.D.
Karen Jeanne Prowda, M.D.
Eve H. Rice, M.D.
Eva C. Ritvo, M.D.
Robert A. Root, M.D.
Kenneth P. Rosenberg, M.D.
Diane C. Rudolph, M.D.
Charles Silberstein, M.D.
Lisa Sombrotto, M.D.
Margaret Gail Spinelli, M.D.
Judith Hertz Tanenbaum, M.D.
Helen Tierney, M.D.
Wayne A. Ury, M.D.
Robert L. Wolski, M.D.
Caryl E. Yanow, M.D.

Graduate Staff, Westchester Division

Clinical Fellow
Mario Rodriguez, M.D.

Psychiatrist
Steven J. Romano, M.D.

Assistant Psychiatrists (Child Psychiatry)
Susan J. Finkelstein, M.D.
Richard A. Flamberg, M.D.
Carla M. Polcyn, M.D.
Valerie A. N. Shell, M.D.

Assistant Psychiatrists
Larry V. Amsel, M.D.
Debra A. Appel, M.D.
Jeffrey D. Bedrick, M.D.
Beth M. Belkin, M.D., Ph.D.
Hope Berkeley, M.D.
Betsy Jo Bittman, M.D.
Devra Braun, M.D.
Cathy Canepa, M.D.
Sara A. Cartmell, M.D.
Janis Chester, M.D.
Henry Chung, M.D.
Marcia Delman, M.D.
M. Bridget Downes, M.D.
Eric M. Grabstein, M.D.
Rita J. Grogan, M.D.
Richard A. Hahn, M.D.
Frances Gaines Haxton, M.D.
Nancy C. Horowitz, M.D.
Leslie K. Jacobsen, M.D.
R. Matthew Kamins, M.D.
Mary K. Kentros, M.D.
Charles C. Kim, M.D.
Sonia O. Kulchycky, M.D.
Alexander C. L. Lerman, M.D.
Donna E. Lewinter, M.D.
Gregory A. Miller, M.D.
Robert A. Moran, M.D.
Helen C. Panarites, M.D.
Brian D. Poeschla, M.D.
Burton Presberg, M.D.
Ilene Rabinowitz, M.D.
Charles P. Ramesar, M.D.
Tara L. Sherman, M.D.
Bennett L. Solnick, M.D.
Robert J. Solomon, M.D.
Anthony J. Stern, M.D.

Denise Szczucki, M.D.
Bradford M. Tepper, M.D.
Mariann Turato, M.D.
Barbara E. Ziv, M.D.

Radiology

Medical Staff

Radiologist-in-Chief
Joseph P. Whalen, M.D.

Attending Radiologists
Mostafa A. Batata, M.D.
David V. Becker, M.D.
Richard S. Benua, M.D.
Yahya M. Berkmen, M.D.
Florence Chien-Hwa Chu, M.D.
Michael D. F. Deck, M.B.,B.S.
John A. Evans, M.D.
Robert H. Freiberger, M.D.
Amy Beth Goldman, M.D.
David B. Hayt, M.D.
Jeremy J. Kaye, M.D.
Elias Kazam, M.D.
Lourdes Nisce, M.D.
Helene Pavlov, M.D.
Nathan Poker, M.D.
Thomas A. Sos, M.D.
R. Caird Watson, M.D.
Patricia Winchester, M.D.

Associate Attending Radiologists
Paula W. Brill, M.D.
F. Mitchell Cummins, M.D.
Bernard Ghelman, M.D.
Antonio F. Govoni, M.D.
Claudia I. Henschke, M.D.
James R. Hurley, M.D.
William A. Rubenstein, M.D.
Robert Schneider, M.D.
George Stassa, M.D.
Hind S. Teixidor, M.D.
Robert D. Zimmerman, M.D.

Assistant Attending Radiologists
Steven A. Albert, M.D.
Alison Bender Haimes, M.D.
Barbara Lucile Binkert, M.D.
Georgia A. Cataldi, M.D.
Sheila D. Davis, M.D.
Shari B. Epstein, M.D.
Andrew W. Haraway Jr., M.D.
Linda A. Heier, M.D.
James C. Hirschy, M.D.
Bennett J. Kashdan, M.D.
Richard J. Katz, M.D.
Young Sook Kim, M.D.
Peter A. Kosovsky, M.D.
George Krol, M.D.
Susan C. Krysiewicz, M.D.
Miriam Levy-Ravetch, M.D.
Charlynn C. Maniatis, M.D.
John A. Markisz, M.D.
Marlene E. Rackson, M.D.
Elizabeth Ramirez de Arellano, M.D. (leave of absence)
Scott J. Sherman, M.D.
Karen Weingarten, M.D.
David A. Wojtasek, M.D.
David F. Yankelevitz, M.D.

Clinical Affiliate
Martin Barandes, M.D.

Professional-Associate Staff

Attending Physicist (Nuclear Medicine)
Rodney E. Bigler, Ph.D.

Assistant Attending Physicist (Nuclear Medicine)
Pat Zanzonico, Ph.D.

Professional Associate (Physics)
Stephen Balter, Ph.D.

Graduate Staff

Clinical Fellows
John Della Badia, M.D.
Antonio G. Bermudez, M.D.
Marcia F. Blacksin, M.D.
Patricia E. Cole, M.D.
George A. Dawson, M.D.
Santiago J. Hernandez, M.D.
Caren Jahre, M.D.
Isaac L. Kaplan, M.D.
Thomas P. Kaufmann, M.D.
Jasbir Mahal, M.D.
William H. McFee, M.D.
Doreen Moreira, M.D.
Bette J. Nyhlen, M.D.
Richard B. Rafal, M.D.
Craig H. Sherman, M.D.
John Sierra, M.D.
Buckley J. terPenning, M.D.

Assistant Radiologists (Nuclear Medicine)
Tsuneo Hirano, M.D.
Hai Van Pham, M.D.

Assistant Radiologists
Christel J. Bauer, M.D.
Ana G. Cajade, M.D.
Gail A. Calamari, M.D.
Chris E. Chernesky, M.D.
Gerard A. Compito, M.D.
Christopher J. Conners, M.D.
Frank A. DuPont, M.D.
Gail E. Eddens, M.D.
Robert J. Ernst, M.D.
Roger J. Frey, M.D.
Shulamith Goldberg, M.D.
James F. Gruden, M.D.
Marc L. Jouandet, M.D.
Terry L. Levin, M.D.
Laura Liberman, M.D.
Ronald A. Manfredi, M.D.
Eileen T. McGlynn, M.D.
Ruth E. Moran, M.D.
Levon N. Nazarian, M.D.
Steven R. Olson, M.D.
Lawrence H. Schwartz, M.D.
Emily Stern, M.D.
Dennis R. Swearengin, M.D.
Jody Lee Tanabe, M.D.

Rehabilitation Medicine

Medical Staff

Physiatrist-in-Chief
Willibald Nagler, M.D.

Associate Attending Physiatrists
Ronald F. Green, M.D.
Emmanuel Rudd, M.D.

Assistant Attending Physiatrists
Sheryl R. Levin, M.D.
Gale Pugliese, M.D.
Irene von Estorff, M.D.

Clinical Affiliates
Irina Barkan, M.D.
Andrew D. Brown, M.D.
Subhadra L. Nori, M.B.,B.S.
Isabella Maria Rampello, M.D.
Dae-Sik Rho, M.D.
Peter H. Stern, M.D.

Professional-Associate Staff

Professional Associates
John S. Ferrari, M.S.
Delia Gorga, Ph.D.
Michael E. Groher, Ph.D.
Roberta Y. Hawkins, M.A.
R. Paul Jordan, D.P.M.
Susan D. Koski
H. Richard Lehneis, Ph.D.
Janet Mines
Lydia Wingate, Ph.D.

Professional Associate (Podiatry)
Michael Polchaninoff, D.P.M.

Graduate Staff

Assistant Physiatrists
Susana G. Duncan, M.D.
Neal R. Dunkelman, M.D.
Dorota M. Gribbin, M.D.
Elisabeth A. Lachmann, M.D.
Kevin Scott Ladin, M.D.
Steven G. Marini, M.D.
Jack L. Rook, M.D.
Richard Tunkel, M.D.

Surgery

Surgeon-in-Chief
G. Tom Shires, M.D.

General Surgery

Medical Staff

Attending Surgeons
Murray F. Brennan, M.D.
Jerome J. Decosse, M.D.
Philip R. Exelby, M.D.
Walter F. Pizzi, M.D.
S. Frank Redo, M.D.
Albert L. Rubin, M.D.
Kurt H. Stenzel, M.D.
George E. Wantz, M.D.
John C. Whitsell II, M.D.

Associate Attending Surgeons
Anthony C. Antonacci, M.D.
Philip S. Barie, M.D.
Harry L. Bush Jr., M.D.
Jhoong S. Cheigh, M.D.
Armand F. Cortese, M.D.
John Mihran Davis, M.D.
Cleon W. Goodwin, M.D.
Peter M. Guida, M.D.
Alexander E. Kuehl, M.D.
Stephen F. Lowry, M.D.
Vincent F. Marzulli, M.D.
Kevin P. Morrissey, M.D.
Robert R. Riggio, M.D.
Stuart D. Saal, M.D.
G. Tom Shires III, M.D.
Michael F. Silane, M.D.
Paul A. Skudder, M.D.
Barry H. Smith, M.D., Ph.D.
William T. Stubenbord, M.D.
John F. Sullivan, M.D.
Luis Tapia, M.D.
Roger W. Yurt, M.D.

Assistant Attending Surgeons
John M. Aronian III, M.D.
Adolfo M. Ayuyao, M.D.
James L. Clarke, M.D.
Robert Paul Cordone, M.D.
William T. Curry, M.D.
Richard A. Dietrich, M.D.
Jerome Finkelstein, M.D.
Gregory Fried, M.D.
James P. Gaston, M.D.
Paul H. Halebian, M.D.
G. Errol King, M.D.
Michael P. LaQuaglia, M.D.
Marisa Lawrence, M.D.
Michael A. Marano, M.D.
Carmine J. Mauro, M.D.
Joseph A. McAuley, M.D.
Eugene J. Nowak, M.D.
Harry Statman, M.D.
John C. L. Wang, M.D.
Giles F. Whalen, M.D.

Clinical Affiliate
David A. Mayer, M.D.

Professional-Associate Staff

Surgeons' Assistants
Diana L. D'Amelio
Donna M. Hamilton
David Johnson
John Lee
Mary L. Lombardi
Geoffrey O'Sullivan
Patricia J. Richardson
Howard F. Rose

Graduate Staff

Clinical Fellows
Annabel E. M. Barber, M.D.
William E. Bond, M.D.
Thomas J. Fahey III, M.D.
Eva Fischer, M.D.
Robert J. Hariri, M.D., Ph.D.
Arthur S. Hawes, M.D.
William G. Jones II, M.D.
Edward Paul Southern, M.D.

Surgeons
Eli R. Capouya, M.D.
Heidi D. Gorsuch, M.D.
I. Michael Leitman, M.D.
Steven K. Macheers, M.D.
Stephen M. Martin, M.D.
Eric J. Miller, M.D.
Kenneth K. Tanabe, M.D.
Joseph R. Vitolo, M.D.

Assistant Surgeons
Ronald G. Albuquerque, M.D.
C. Andrew Bonham, M.D.
David M. Brams, M.D.
John T. Braun, M.D.
John M. Brown III, M.D.
Michael E. Chen, M.D.
Armann O. Ciccarelli, M.D.
Mark A. Codner, M.D.
Yuman Fong, M.D.
Henri R. Ford, M.D.
J. Jeffrey Freda, M.D.
Louis Gevirtzman, M.D.
Leonard N. Girardi, M.D.
Stephen T. Greenberg, M.D.
Tamara L. Guion, M.D.
Stephen U. Harris, M.D.
Randal D. Haworth, M.D.
Nicole J. Kafka, M.D.
Milan Kinkhabwala, M.D.
Richard E. Kirschner, M.D.
Sarah C. Klemmer, M.D.
Thomas K. Lee, M.D.
Andrew M. Lowy, M.D.
Christopher J. Magovern, M.D.
Jonathan D. Mandell, M.D.
Edward J. Marcaccio Jr., M.D.
Faith A. Menken, M.D.
Joseph P. Minei, M.D.
Gregory M. Organ, M.D.
Scott Alan Rodeo, M.D.
Catherine A. Ronaghan, M.D.
Michael B. Silberberg, M.D.
Alexandra H. Simkovich, M.D.
Aaron T. Spingarn, M.D.
Lisa A. Straus, M.D.
J. Rogers Temple Jr., M.D.
William A. Thompson III, M.D.
Kimberly J. Van Zee, M.D.
Anthony P. Vastola, M.D.
Ferdinand Velasco, M.D.
Alexander P. Vukasin, M.D.
Christina Weltz, M.D.

Cardiothoracic Surgery

Medical Staff

Attending Surgeon-in-Charge
O. Wayne Isom, M.D.

Attending Surgeons
Cranston W. Holman, M.D.
David B. Skinner, M.D.

Associate Attending Surgeons
Karl H. Krieger, M.D.
John C. McCabe, M.D.
Valavanur A. Subramanian, M.D.

Assistant Attending Surgeons
Nasser K. Altorki, M.D.
Dennis A. Bloomfield, M.D.
Jeffrey P. Gold, M.D.
Kenneth R. Krauss, M.D.
Samuel J. Lang, M.D.
Jerome Simson, M.D.
Alan Spiegel, M.D.

Graduate Staff

Clinical Fellows
Robert T. Fried, M.D.
Wilson Ko, M.D.
William D. Lazenby Jr., M.D.

Thoracic Surgeons
Gabriel S. Aldea, M.D.
Daniel G. Ciaburri, M.D.

Assistant Thoracic Surgeons
Todd K. Rosengart, M.D.
James R. Taylor Jr., M.D.
Michael R. Zenn, M.D.

Dentistry and Oral and Maxillofacial Surgery

Medical Staff

Attending Oral Surgeon-in-Charge
Stanley J. Behrman, D.M.D.

Attending Dentist
John J. Putnam, D.D.S.

Associate Attending Oral Surgeon
David A. Behrman, D.M.D.

Associate Attending Dentist (Endodontist)
Nelson I. Mendell, D.M.D.

Associate Attending Dentists (Periodontists)
Seymour M. Koteen, D.D.S.
Joseph E. Rowan, D.D.S.

Associate Attending Dentists (Prosthodontists)
Jason C. Lee, D.D.S.
Ivin B. Prince, D.D.S.

Associate Attending Dentist (TMJ)
Leonard E. Quitt, D.D.S.

Associate Attending Dentists
Lawrence A. Behrman, D.D.S.
Harry Lumerman, D.D.S.
Louis Marino, D.D.S.
Ernest R. Piccaro, D.D.S.

Assistant Attending Oral Surgeons
Steven M. Baum, D.D.S.
Thomas M. Darrigan, D.D.S.
Arthur C. Elias, D.M.D.
Michael R. Glogoff, D.M.D.
Jerry L. Halpern, D.D.S.
Andrew J. Hauser, D.D.S.
Claudia B. Kaplan, D.D.S.
Frederick M. Lifshey, D.D.S.
Peter H. Pruden, D.D.S.
Steven J. Tunick, D.M.D.

Assistant Attending Dentists (Endodontists)
Sebastian J. Lentini, D.D.S.
Andrew Seth Melinger, D.M.D.

Assistant Attending Dentists (Orthodontists)
Marc S. Lemchen, D.M.D.
Gregory W. Sanford, D.M.D.
Michael G. Steinberg, D.D.S.

Assistant Attending Dentists (Pedodontists)
Louis M. Cooper, D.D.S.
Mark S. Hochberg, D.D.S.
David J. Levine, D.D.S.
Robin S. Lowenstein, D.M.D.
Jack L. Mitchell, D.D.S.

Assistant Attending Dentists (Periodontists)
Barry M. Libin, D.D.S.
Philip D. Pack, D.M.D.
George W. Sferra Jr., D.D.S.

Assistant Attending Dentist (Prosthodontist)
Jennifer J. Burrell, D.D.S.

Assistant Attending Dentists
Richard F. Giannandrea, D.D.S.
Robert Karsten, D.D.S.
Guy N. Minoli, D.D.S.
Edward J. Prus, D.D.S.
Steven Saltzman, D.D.S.
Robert M. Sorin, D.M.D.
Michael J. Vassallo, D.D.S.

Graduate Staff

Oral Surgeon
Jonathan T. Perry, D.D.S.

Assistant Oral Surgeon
Gregory C. Chotkowski, D.M.D.

Intern in Oral Surgery
Gayle Tutone Miranda, D.D.S.

Interns, General Practice Residency Program
Chrys Anixiadis-Cutrone, D.D.S.
Richard G. Gray, D.M.D.
Naila Naseem, D.D.S.

Neurosurgery

Medical Staff

Attending Surgeon-in-Charge
Russel H. Patterson Jr., M.D.

Attending Surgeon
Richard A. R. Fraser, M.D.

Associate Attending Surgeons
Joseph H. Galicich Jr., M.D.
Francis W. Gamache Jr., M.D.
Michael H. Lavyne, M.D.

Assistant Attending Surgeons
Jamshid B. G. Ghajar, M.D.
Robert B. Snow, M.D.

Graduate Staff

Surgeon
Mazen Khayata, M.D.

Assistant Surgeons
Mark H. Bilsky, M.D.
John M. Emery III, M.D.
Stanley B. Martin, M.D.
Kevin J. Tracey, M.D.

Orthopedics

Medical Staff

Surgeon-in-Chief, The Hospital For Special Surgery
Andrew J. Weiland, M.D.

Attending Surgeons
Allan E. Inglis, M.D.
John N. Insall, M.D.
Bernard Jacobs, M.D.
Joseph M. Lane, M.D.
David B. Levine, M.D.
Chitranjan S. Ranawat, M.D.
Leon Root, M.D.
Eduardo A. Salvati, M.D.
Russell F. Warren, M.D.
Philip D. Wilson Jr., M.D.

Associate Attending Surgeons
Walther H. O. Bohne, M.D.
Stephen William Burke, M.D.
John P. Lyden, M.D.
Peter J. Marchisello, M.D.
Ralph C. Marcove, M.D.
Richard McCormack Jr., M.D.
Paul M. Pellicci, M.D.
Thomas P. Sculco, M.D.
Thomas L. Wickiewicz, M.D.

Assistant Attending Surgeons
David W. Altchek, M.D.
Abraham T. Appleton, M.D.
Roberta Brockman, M.D.
Frank P. Cammisa Jr., M.D.
Charles N. Cornell, M.D.
Mark P. Figgie, M.D.
John H. Healey, M.D.
Norman A. Johanson, M.D.
Stephen J. O'Brien, M.D.
Jeanne R. Pamilla, M.D.
Kostas P. Velis, M.D.
Russell E. Windsor, M.D.

Graduate Staff

Surgeon
Mark K. Bowen, M.D.
Robert L. Buly, M.D.
Daniel E. Cooper, M.D.
Paul H. Dossick, M.D.
William F. Flynn Jr., M.D.
Joel M. Goldstein, M.D.
Steven B. Haas, M.D.
Michael H. Huo, M.D.
Scott G. Kantor, M.D.
Kenneth J. Kress, M.D.
Benisse Lester, M.D.
Michael J. Maynard, M.D.
Michael C. Moran, M.D.
Jeffrey T. Pravda, M.D.
Steven H. Stern, M.D.
Jon J. Warner, M.D.

Assistant Surgeons
Edward A. Athanasian, M.D.
Michael S. Bednar, M.D.
Michael G. Browne, M.D.
George L. Caldwell Jr., M.D.
G. Hadley Callaway, M.D.
John C. Edwards, M.D.
Stephen P. England, M.D.
Michelle Gerwin, M.D.
Jeffrey L. Hanway, M.D.
Scott D. Martin, M.D.
Bruce H. Moeckel, M.D.
William H. Montgomery, M.D.
Christopher S. Mow, M.D.
Stephen J. Nicholas, M.D.
Michael J. Pagnani, M.D.
George A. Paletta Jr., M.D.
Brendan M. Patterson, M.D.
Jeffery L. Pierson, M.D.
Louis H. Rappoport, M.D.
Peter F. Rizzo, M.D.
Paul T. Rubery Jr., M.D.
Stephen C. Saddler, M.D.
Andrew V. Slucky, M.D.
Mark Sobel, M.D.
Clifford B. Tribus, M.D.

Plastic Surgery

Medical Staff

Attending Surgeon-in-Charge
Lloyd Hoffman, M.D.

Attending Surgeons
Dicran Goulian, M.D.
Randolph H. Guthrie Jr., M.D.

Associate Attending Surgeon
James W. Smith, M.D.

Assistant Attending Surgeons
Gary S. Bromley, M.D.
Robert L. Cucin Jr., M.D.
Joseph Feinberg, M.D.
David A. Hidalgo, M.D.
Gerald Imber, M.D.
Martin E. Kessler, M.D.
Gregory S. La Trenta, M.D.
Thomas C. McLure III, M.D.
Edward W. Powers III, M.D.
Kenneth O. Rothaus, M.D.
Robert G. Schwager, M.D.
B. Donald Sklansky, M.D.

Graduate Staff

Surgeons
Lloyd B. Gayle, M.D.
Robert T. Grant, M.D.

Assistant Surgeons
Caroline A. Glicksman, M.D.
Brad P. Herman, M.D.
Lyle S. Leipziger, M.D.
Huu N. Pham, M.D.

Urology

Medical Staff

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E. Darracott Vaughan Jr., M.D.

Attending Surgeons
William R. Fair, M.D.
John H. McGovern, M.D.
Edward C. Muecke, M.D.
Willet F. Whitmore Jr., M.D.
John J. Williams, M.D.
Alan Yagoda, M.D.

Associate Attending Surgeons
Neil H. Bander, M.D.
Richard H. Bard, M.D.
John W. Coleman, M.D.
John A. Fracchia, M.D.
Marc Goldstein, M.D.
Harry W. Herr, M.D.
David T. Mininberg, M.D.
W. Reid Pitts Jr., M.D.
Jon M. Reckler, M.D.
Robert A. Riehle Jr., M.D. (leave of absence)
Robert S. Waldbaum, M.D.

Assistant Attending Surgeons
Joel Abramowitz, M.D.
Carlos Arango, M.D.
Felix L. Badillo, M.D.
Stephen R. Baumgarten, M.D.
Robert J. Berson, M.D.
John D. Birkhoff, M.D.
John C. Byrne, M.D.
Peter N. De Sanctis, M.D.
Jean-Francois Eid, M.D.
Stephen Fortunoff, M.D.
Myron E. Freund, M.D.
Suzanne L. Frye, M.D.
Bruce R. Gilbert, M.D.
Jeffrey Glasser, M.D.
Robert W. Gluck, M.D.
Michael M. Gross, M.D.
Frederick A. Gulmi, M.D.
Jack I. Hershman, M.D.
Arno D. Housman, M.D.
John J. Ippolito, M.D.
Stuart Kase, M.D.
Nachum M. Katlowitz, M.D.
Howard N. Kivell, M.D.
Kenneth R. Kurz, M.D.
Marcus H. H. Loo, M.D.
Franklin C. Lowe, M.D.
Isaac Madeb, M.D.
James P. McCarron Jr., M.D.
Thomas P. McGovern, M.D.
Piero O. Niceta, M.D.
Carl M. Pellman, M.D.

Ben I. Preminger, M.D.
Barry W. Rubin, M.D.
Jeffrey J. Sandhaus, M.D.
Michael A. Savino, M.D.
R. Ernest Sosa, M.D.
Vincent J. Tumminello, M.D.
Mark H. Vine, M.D.
Sasha Wainstein, M.D.
Michael H. Wechsler, M.D.
Stuart A. Weinerman, M.D.
Gilbert J. Wise, M.D.
Morey Wosnitzer, M.D.
Paul L. Ziegler, M.D.

Graduate Staff

Clinical Fellows
Peter N. Schlegel, M.D.
Julia R. Spencer, M.D.

Surgeons
Kenneth J. Bregg, M.D.
Neal D. Shore, M.D.

Assistant Surgeons
Edward M. Beck, M.D.
David G. Hesse, M.D.
Thomas W. Jarrett, M.D.
Albert N. Kim, M.D.
Aaron P. Perlmutter, M.D.
Joph Steckel, M.D.
Robert E. Steckler, M.D.
George P. H. Young, M.D.

Directors of Laboratories

Clinical Pathology Laboratories

Pathologist-in-Chief
John T. Ellis, M.D.
Laboratory Manager
Marvin Tessler, Ph.D.
Consultant in Clinical Biochemistry
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Blood Bank and Transfusion Service
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Cardiac Graphics, Adult
Paul D. Kligfield, M.D.

Cardiac Graphics, Pediatrics
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Nuclear Medicine
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Pediatric Exercise
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Pulmonary Function
Thomas K. C. King, M.D.

Apothecary-in-Chief
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Surgical Nursing
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Critical Care Nursing
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Perioperative Services

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(Israel Rogosin Professor of Biochemistry)

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Julian R. Rachele, Ph.D.

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Manikkam Suthanthiran, M.D. (surgery)
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Gordon F. Fairclough, Ph.D.
Marilena Fotino, M.D. (surgery)
Jerald D. Gass, Ph.D.
Edward T. Schubert, Ph.D. (pediatrics)
John F. Sullivan, M.D. (surgery)
Luis Tapia, M.D. (surgery)

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Andrew P. Seddon

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Moses Chao, Ph.D.
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Fakhry G. Girgis, Ph.D., M.D.
Joel Pardee, Ph.D.
Paula Traktman, Ph.D.
John C. Weber, D.D.S.

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Fernando C. Reinach, Ph.D.

Adjunct Associate Professor
Martin D. Hamburg, Ph.D. (Suffolk Child Developmental Center)

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Michael A. Caudy, Ph.D.
Sandra Citi, M.D., Ph.D.
Barbara McGuire, Ph.D. (Rockefeller Univ.)
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Barbara Paynton, Ph.D.
Anuradha A. Saad, Ph.D.
Martin Teintze, Ph.D. (medicine)

Visiting Assistant Professors
Takashi Mikawa, Ph.D.
Chinnakkannu Panneerselvam, Ph.D.
Spencer J. Turkel, Ph.D.

Senior Lecturer
Daniel Gomez, Ph.D.

Research Associates
Arlene Gonzalez-Sanchez, M.S.
Michael O. Montgomery, M.D.

Visiting Fellows
Andrei Borisov, Ph.D.
Estomih Mtui, M.D.
Chunshan, Xie, B.S.

Staff Associates
Leona Cohen-Gould, M.S.
William A. Giddings, M.P.S.
Lori Van Houten, M.F.S.

Postdoctoral Associates
Leonard Eisenberg, Ph.D.
Thierry Gilbert, Ph.D.
Steven Goldfine, Ph.D.
Lutz Graeve, Ph.D.
David K. Hanzel, Ph.D.
Andre LeBivic, Ph.D.
Judith Litvin, Ph.D.
Abraham P. Mathews, Ph.D.
Ivan R. Nabi, Ph.D.
Sharon K. Powell, Ph.D.
Franz E. Weber, Ph.D.
Chiara Zurzolo, M.D.

Microbiology

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(R.A. Rees Pritchett Professor of Microbiology)

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William M. O'Leary, Ph.D.
Laurence B. Senterfit, Sc.D.

Associate Professor
Dieter H. Sussdorf, Ph.D.

Associate Professor of Clinical Microbiology
Richard F. D'Amato, Ph.D.

Associate Professor of Pediatrics in Microbiology
Paul J. Edelson, M.D.

Assistant Professors
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Erik Falck-Pedersen, Ph.D.
Neil Hackett, Ph.D.
Monica Lusky, Ph.D.
Michael O'Donnell, Ph.D.
Constance D. Rothermel, Ph.D.
Betsy von Kreuter, Ph.D.

Assistant Professors of Cell Biology & Anatomy in Microbiology
Anthony M. C. Brown, Ph.D.
Paula Traktman, Ph.D.

Research Associate
Robert M. Kotin, Ph.D.

Pharmacology

Chairman
W. Y. Chan, Ph.D.
(Professor and Acting Chairman)

Emeritus Professor
Walter F. Riker Jr., M.D.
(Revlon Pharmaceutical Professor Emeritus of Pharmacology and Toxicology)

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(Sloan-Kettering Institute)
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Ursula Muller-Eberhard, M.D.
(pediatrics)
Michiko Okamoto, Ph.D.
Marcus M. Reidenberg, M.D.
Arleen B. Rifkind, M.D.
Alan Van Poznak, M.D.
(anesthesiology)

Adjunct Professor
Barry A. Berkowitz, Ph.D.

Associate Professors
Kathleen E. Foley, M.D.
(neurology)
Henn Kutt, M.D. (neurology)
Gavril Pasternak, M.D., Ph.D.
(neurology)
Hazel H. Szeto, M.D., Ph.D.

Adjunct Associate Professors of Clincal Pharmacology
Dennis E. Drayer, Ph.D.
Oscar L. Laskin, M.D.

Adjunct Associate Professor
Antonio Sastre, Ph.D.

Assistant Professors
Diane Felsen, Ph.D. (urology)
Steven Gross, Ph.D.
Robert B. Meyer, M.D. (medicine)
Daniel B. Notterman, M.D.
(pediatrics)

Instructors
Steven Fiamengo, M.D.
Steven O. Franklin, Ph.D.
Greg Hartman, M.D.

Fellows
Charles Ganley, Ph.D.
Kenneth Grasing, M.D.
Da Fang Wu, M.B.S.S.

Research Associates
Aida Chenouda, Ph.D.
Theresa Huang, B.S.
Beverly Lorenzo, B.S.
Yoshitake Sato, Ph.D.

Postdoctoral Associates
Lin Cao, M.D.
Olufunmilayo Fasehun, Ph.D.
Barbel Lamparter, M.D.
Kunnihiko Nakai, Ph.D.
Yasuaki Noguchi, Ph.D.

Physiology and Biophysics

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(Maxwell M. Upson Professor of Physiology)

Emeritus Professor
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Professors
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Anna-Rita Fuchs, M.Sc.
(ob/gyn)
Daniel Gardner, Ph.D.
Marvin C. Gershengorn, M.D.
(medicine)
Bernice Grafstein, Ph.D.
(Vincent and Brooke Astor Distinguished Professor of Neuroscience)
Chin O. Lee, M.D.
Thomas M. Maack, M.D.
Peter R. MacLeish, Ph.D.
Lawrence G. Palmer, Ph.D.
John L. Stephenson, M.D.
(biomathematics)

Research Professor
Jean Sealey, D.Sc.
(medicine)

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Erich Heinz, M.D.

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Henry J. Sackin, Ph.D.
Ellen Townes-Andersen, Ph.D.
Alan M. Weinstein, M.D.

Clinical Associate Professors
Thomas K. C. King, M.D.
(medicine)
Alfred N. Krauss, M.D.
(pediatrics)

Adjunct Associate Professors
Sulamita Baruch, M.D., Ph.D.
John Franklin, M.D.
John P. Reeves, Ph.D.
Bernd W. Urban, Ph.D.
(anesthesiology)

Assistant Professors
Maria Jose Camargo, M.D., Ph.D.
Daniel Catanzaro, Ph.D.
Daniel Duch, Ph.D.
Gary James, Ph.D.
(medicine)
Susan Jones, Ph.D.
Kwang-Jin Kim, Ph.D.
(pulmonary)
Denis Larrivee, Ph.D.
Margaret Moline, Ph.D.
(psychiatry)
Maiken Nedergaard, M.D., Ph.D.
(neurology)
Esperanza Recio-Pinto, Ph.D.
Suzanne Scarlata, Ph.D.

Adjunct Assistant Professors
Thomas J. Colatsky, Ph.D.
David C. Gadsby, Ph.D.
Ernest Natke Jr., Ph.D.

Visiting Assistant Professor
Juraj Okolicany, M.D., Ph.D.

Senior Research Associate
Gustavo Frindt, M.D.

Research Associate
Juif Frank Jen, M.A.

Postdoctoral Associates
Stephen Lakos, M.D.
Ellen J. Levy, Ph.D.
Randi B. Silver, Ph.D.
Dai-Yuan Wang, M.D.

Fellows
Pascal Daumas, Ph.D.
Dragana Filipovic, M.D.
Beatriz Fontoura, M.A.
Snezona Milovanovic, M.D.

Public Health

Chairman
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(Livingston Farrand Professor Emeritus of Public Health)

Emeritus Professor
Farrington Daniels, M.D.

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Mary E. W. Goss, Ph.D.
(sociology)
Robert B. Millman, M.D.
(Saul P. Steinberg Distinguished Professor of Psychiatry and Public Health)
Hirsch Ruchlin, Ph.D.
(economics)

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Warren D. Johnson Jr., M.D.

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Suzanne Howe, M.D.
B. H. Kean, M.D.
Leona Baumgartner, M.D.

Clinical Professors
Eric J. Cassell, M.D.
Eugene G. McCarthy Jr., M.D., M.P.H.
Cladd Stevens, M.D., M.P.H.

Adjunct Professors
Michael Alderman, M.D.
Betty J. Flehinger, Ph.D.
(biostatistics)
Pascal J. Imperato, M.D.
Valerie Miké, Ph.D. (biostatistics)
Gerald Palevsky, Eng. Sc.D., P.E.
(engineering)
Alfred L. Scherzer, M.D.
Victor W. Sidel, M.D.
Edward A. Wolfson, M.D., M.P.H.

Associate Professors
Gilbert Botvin, Ph.D.
(psychology)
Kenneth Tardiff, M.D.

Associate Professors of Clinical Public Health
Robert Braham, M.D.
Elizabeth T. Khuri, M.D.

Emeritus Clinical Associate Professors
Doris Schwartz, M.A.
Arthur Seligmann, M.D.
Carl A. Berntsen Jr., M.D.
Alice Ullman, M.S.
(social work)

Clinical Associate Professors
Madelon L. Finkel, Ph.D.
Daniel G. Miller, M.D.
Karolyn Siegel, Ph.D.

Adjunct Associate Professors
Susan Anderson Kline, M.D.
Mary J. Kreek, M.D.
Steven Phillips, M.D., M.P.H.

Adjunct Associate Professor of Clinical Public Health
Emil Pascarelli, M.D.

Associate Epidemiologist in Public Health
Mary Ellen Warshauer, M.A.

Assistant Professors
Eli Baker, Ph.D.
Ross Brower, M.D.
Linda Dusenbury, Ph.D.
(psychology)
Nancy Geller, Ph.D.
Linda Gerber, Ph.D.
Allan Gibofsky, M.D., J.D.
Barry Jordan, M.D.
Jon Kerner, Ph.D.
(psychology)
Katherine LaGuardia, M.D.
Martin Lesser, Ph.D.
(biostatistics)
Shanta Madhaven, Ph.D.
John Nicholson, M.D.
(medicine)
Peter Schnall, M.D.
Rosemary Soave, M.D.

Clinical Assistant Professors
Gabriele Bondi, M.D., M.P.H.
John Dougherty, M.D.
Gary LeClerq, M.D.
Edith Zang, Ph.D. (biostatistics)

Adjunct Assistant Professors
Diane Benezra, M.D.
Steven Blum, Ph.D.
Jack DeHovitz, M.D.
James H. Godbold Jr., Ph.D.
(biostatistics)
William Loery, M.D., M.P.H.
Christine P. Mauck, M.D., M.P.H.
Carol Wilkinson, M.D.

Adjunct Clinical Assistant Professor
Arthur L. Levin, M.D.

Lecturers
Robert Biblo
Jean Cropper, M.P.H.
Cynthia Hosay, Ph.D.
David Pomrinse, M.D.
Yvette Schlussel, M.D.
Judith Trachtenberg, M.S.W.
George Vecchione, M.S.

Instructors
Kenneth Offit, M.D., M.P.H.
Carol Weiss, M.D.

Clinical Instructor
Paula Elster, M.D.

Research Associates
Horace Batson, Ph.D.
Catherine Goldberg, Ph.D.
Judith Jacobson, M.B.A., M.P.H.
Barbara Napolitano, M.A.
Sandra Horowitz, Ph.D.

Staff Associates
Elizabeth Jagielska-Wilk, M.D.
Stephen Mills, M.P.H.
Joshua Muscat, M.P.H.

Teaching Associate
Irwin Katz, M.P.H.

Deaths

We record with sorrow the passing during 1989 of the following members of the center's professional staff and faculty:

Peter Dineen, M.D.
Attending Surgeon
R. Gordon Douglas, M.D.
Honorary Staff (Obstetrics and Gynecology)
Aldo R. Faga, M.D.
Clinical Affiliate (Medicine)
John M. Hefton, Ph.D.
Associate Professor of Cell Biology and Anatomy in Surgery
J. Harry Katz, M.D.
Emeritus Staff (Medicine)
Neil Lebowitz, M.D.
Assistant Attending Psychiatrist
E. Hugh Luckey, M.D.
Honorary Staff (Medicine)
Virginia C. Mitty, M.D.
Associate Attending Pediatrician
Joseph N. Nathanson, M.D.
Attending Obstetrician and Gynecologist

A Guide for You and Your Advisors

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Gifts, bequests and trusts are important sources of support for the New York Hospital-Cornell Medical Center. Such gifts provide funding for a wide range of programs, including those that provide patient care, educate future physicians and scientists, and expand community outreach. Additionally, these gifts make possible pioneering biomedical research which results in new and improved cures and treatments for disease, helping people today as well as in future generations.

Gifts may be made in a number of ways—by cash, securities, or tangible property. They may be given outright, by bequest, or through a trust arrangement which can provide an income to the medical center, to the donor, or to his or her beneficiaries, for a predetermined period of time or for life.

The medical center encourages gifts without restriction so as to permit greater flexibility in planning and administering its extensive programs in patient care, education and research. However, if a donor is interested in making a gift, bequest, or trust to be used in whole or in part for any specific purpose within the hospital, medical college, or medical center, such use may be specified.

The New York Hospital-Cornell Medical Center is comprised of the Society of the New York Hospital and Cornell University Medical College. Both the Society and Cornell University, of which the medical college is a part, are qualified not-for-profit institutions which receive major support from private gifts. Gifts to the hospital, medical college, and medical center by individuals, foundations, or corporations are exempt from income, gift, and inheritance taxes to the extent and in the manner provided by federal and state laws.

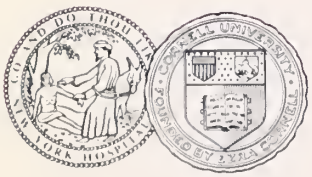
The medical center is pleased to provide information about its numerous programs and activities, and to consult with donors and their advisors about various gift ideas, many of which provide a naming opportunity. Our *Guide to Giving* is available by calling the number listed below.

The Society of the New York Hospital, which is the legal corporate name for the New York Hospital, is a corporation created by Royal Charter granted by King George III of England in 1771. The suggested terminology for an unrestricted bequest to or for its benefit is: "I give, devise and bequeath to The Society of the New York Hospital Fund, Inc., a corporation created under the New York State Not-for-Profit Corporation Law and located in New York City, New York the sum of $_____ (or description of the property) to be used for the general corporate purposes of The Society of the New York Hospital as its board of directors should determine."

If a bequest is made to the medical college, the language may be: "I give and bequeath to Cornell University the sum of $ _____ (or description of property) for use in connection with its Medical College in New York City."

If a bequest is made to the medical center, the language may be, "I give and bequeath to The New York Hospital-Cornell Medical Center Fund, Inc. the sum of $ _____ (or description of property)."

Further information about making a gift to the hospital, college, or medical center can be obtained from Robert A. Burch, Executive Director for Development and Public Affairs, The New York Hospital-Cornell Medical Center, 525 East 68th Street, New York, NY 10021, 212/746-4070.



The New York Hospital-Cornell Medical Center
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